

All Games will be played at CYA or surrounding Complex April 12th Holding Games for 16U Softball Teams Visit website for all registration forms and requirements www.connetquotyouthassociation.org

16U \$400

Tournament Format

- First come first serve basis
- USSSA Tournament Format, Non-Sanctioned
- o 3 game guarantee, 2 game Round Robin, Single Elimination Playoff
- Weather Permitting
- o MVP Medals for individuals during all games, First Place and Runner-Up Awards
- o 2 Umps for each game

Tournament Rules

- USSSA Tournament Format and Rules will apply
- o Team roster is locked once the start of the first game is played for each team
- o A roster and proof of age (birth certificates) will be checked at registration
- Ground rules and field rules will be covered prior to games by umps
- No exceptions to these rules and any/all inquiries will have to go through tournament director
- No refunds for entry fees 30 days prior to event for team withdrawing.
- Tournament format can be changed without notice due to weather or field conditions (eg. Double Elimination, 1 and 1 count, etc..)
- o Tournament Dates can be changed due to weather, in the event of change will most likely be held the following weekend.
- o No refunds of any kind will be considered until after the completion of the tournament

*Please include your payment and insurance forms and mail to above address by April 3rd. Concession stands and/or refreshments will be available throughout the tournament. No alcoholic beverages, Pets, and/or B-B-Q's are allowed on grounds.

The Connetquot Youth Association is proud to present



16U April 12th One Day Tournament (weather permitting)

Fastpitch Tournament Registration Form

Te	am Name :		
Manager :		Coach :	
Address :		Home Phone :	
Cell Phone : _		e-mail :	
		which you wish to register	
Division A	<u>ige</u>	Team Cost	
D16 16	6U	\$550	
Insurance ce	rtificate is requir	ed for registration	
		quot Youth Association needs to be r	•
No team will be	considered registe	ered unless proof of insurance and p	ayment are enclosed with this fo

Incomplete forms will not be accepted.

Make checks payable and insurance accords in the following way: Connetquot Youth Association Mail this completed registration form, proof of insurance, and payment to:

> **CYA Softball Division Fight Autism Tournament** P.O. Box 221 Ronkonkoma, N.Y. 11779-6543

(Questions? Please contact Tom at coachtomk10@verizon.net)

Please include your payment and insurance forms and mail to above address by April 3rd. Concession stands and/or refreshments will be available throughout the tournament. No alcoholic beverages, pets, and/or B-B-Q's are allowed on grounds.

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16U April 12th One Day Tournament (weather permitting)

Team Roster Form

Tear	n Name :				
Manager :		Home Pl	none :		_
Address:		e-mail : Age Division :			
Cell Phone :		Age Div	ision:		
	Player's Name		Date of Birth	Age	#
1	•				
2					
3					
4					
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6					
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16					
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A team's roster will be locked for the tournament after the first gamed played by that team. Any and all changes that need to be made with a roster will be the decision of the tournament director.

Tournament rules, brackets, and schedules will be available the week prior to the event. Concession stands and/or refreshments will be available throughout the tournament. No alcoholic beverages, pets, and/or B-B-Q's are allowed on grounds.