

NCSSA - Tournament Directors Contract 2016

I accept the award of an NCSSA Tournament for the following location along with the following conditions ** I will pay any/all tournament fees as required by NCSSA 14 days prior to the tournament.

Tournament Director _____ Date _____ T F S S

Location of Tournament _____ Number of Fields _____

My affiliation with NCSSA is - NCSSA Team Manger _____, NCSSA Member _____, Other _____

I agree to follow the NCSSA/SSUSA rules of play, including any/all revised rules that might apply

I agree to follow all rules that apply to a team's roster, adding players etc;

I agree to follow the uniform rule of NCSSA

I agree to have all bracketing approved by the Region Primary representative prior to posting.

I agree to contact any manager if his team is 15 years in age difference, example - (75 vs 60) (65 vs 50) etc;

I will review NCSSA rules with umpire's before start of tournament and make sure there are copies available

I will turn in all results of tournament to NCSSA proper channels within 3 days of completion of tournament

I agree to make sure maintenance is available and fields water as necessary and no hazards in playing area.

I agree to make sure that restroom facilities are available

I agree to have water available if no other water sources are available or in close proximity.

If concessions are not available, I will post a notice on flyer or tournament team schedule.

I will pay any/all tournament fees as required by NCSSA 14 days prior to the tournament.

I understand that non-compliance of NCSSA rules & polices can result in termination of any further awards of tournaments from NCSSA. Initial _____

Enclosed is my fee of \$125.00 payable to NCSSA

Print Name _____ Date _____

E-Mail _____

Address _____

City _____ State _____ Zip _____

Phone No _____ Cell No _____

Return this contract with Fee to: Don Wever
100 E. Main St
Ripon, Ca 95366