



Heartland Sports



Senior Softball Tournament Entry Form

Tournament # _____ Date _____ Entry Fee _____

Team Name _____

Division- Mens: **50** **55** **60** **65** (circle one) **Competative** **Less-Competative** (circle one)

Womens: **40 & Over** (circle one)

Mgr. Name _____

Address _____

City _____ ST _____ ZIP _____

Phone _____

2nd Phone _____

Fax _____

E-mail _____

Make checks payable to:

Will Rogers

PO Box 1301

Lees Summit, MO 64063

Contact Info:

www.heartlandssportskc.com

1-816-916-7891

---POOL PLAY / CALIFORNIA TIE BREAKER USED

---SPA APPROVED BALL & BATS

---NO REFUNDS FOR ANY REASON

---FOUR GAME GUARANTEE

(EXCEPT RAINOUTS) 1/2 REFUNDS

---ENTRY FORM MUST BE

IF ONE OR MORE GAMES PLAYED

FILLED OUT BEFORE PLAY BEGINS

NO REFUND IF 2 OR MORE GAMES PLAYED

NO TOLERANCE FOR UNRULENESS OR INTOXICATION. IMMEDIATE EJECTION AND/OR PROSECUTION WILL RESULT

The undersigned wish to freely enter this baseball tournament and realize that there are risks involved in this or any athletic activity. With that in mind the undersigned agree to participate in this tournament and accept all the risks involved. Further, by signing below the undersigned agree to release, waive and to not sue the tournament directors, officials, representatives or other persons associated with this tournament. The undersigned takes full responsibility for actions by parents or fans of his or her team and agree to employ good sportsmanship and assist the officials in directing anyone showing poor sportsmanship from the field and the complex.

Sign _____

Date _____