

**ASA YOUTH ROSTER
2011/2012
SOFTBALL TOURNAMENTS**

TEAM NAME:

TOURNAMENT DATE:

TOURNAMENT LOCATION:

CLASSIFICATION:

ASA REGISTERED? YES- NO-

MANAGER NAME:

ADDRESS:

CITY:

STATE:

ZIP CODE:

EMAIL:

PHONE NUMBERS~ CELL:

HOME:

OTHER:

PLAYERS:

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My signature below affirms that I as an authorized representative of team identified on this roster and that I have the authority to sign this roster on behalf of this team. Further my signature confirms our understanding and agreement to comply with CSA requirements including having all participants properly registered with ASA, the tournament rules and the CSA refund policy.

Team Manager, SIGN

Date

Save completed form before closing document. Managers still must bring a signed and completed copy to check in at the start of the tournament.

CLICK ON ENVELOPE IN TOOLBAR ABOVE OR LINK HERE > [EMAIL FORM TO QUEIROLO@onramp113.org](mailto:QUEIROLO@onramp113.org)