Wisconsin Amateur Softball Association, Inc.

Official WASA State Tournament Entry Form

www.wisconsin-asa.org

Instructions:

This form must be filled out by the team manager before they will be allowed to compete in the WASA State Tournament listed below. The forms must be signed by the team manager and the league director in which the team plays. The team must send in all forms listed below to the tournament before they will be officially accepted into the tournament.

The team listed below is currently registered with the WASA and is in good standing with the local ASA Association. This team has supplied a copy of their current years league roster to verify that all players listed on the ASA National Championship Roster are legal. (If applicable)

Please fill out completely and accurately

Men	☐	Class	Major	☐	Age	10-U	☐	35 +	☐	65 +	☐	Fast Pitch	☐
Women	☐		A	☐		12-U	☐	40 +	☐	70 +	☐	Slow Pitch	☐
Co-Ed	☐		B	☐		14-U	☐	45 +	☐			10 - Modified Pitch	☐
Boy's	☐		C	☐		16-U	☐	50 +	☐			9 - Modified Pitch	☐
Girl's	☐		D	☐		18-U	☐	55 +	☐			Co-Ed Slow Pitch	☐
Masters	☐		Gold	☐		23-U	☐	60 +	☐				
Senior's	☐												

Team Information (Print or Type)

Team Name: _____ WASA Card #: _____

Manager: _____

Address: _____

City/State/Zip _____

Home Phone: ( ) _____ Work Phone: ( ) _____

Fax Number: ( ) _____ Cell Phone: ( ) _____

Email: _____ Pager: ( ) _____

The following items must be sent to the tournament director before the team is officially accepted into the WASA State Tournament. **WASA Entry Form/League Roster/ASA Championship Roster/Entry Fee**

Manager's Signature: _____ Date: _____

League Director's Signature: _____ Date: _____

Tournament Director's Signature: _____ Date: _____