

**ASA of PA
National Qualifier
TournamentFact Sheet**

TOURNAMENT NAME:	Chaos Softball 16U ASA/USA Class A National Qualifier
DATE:	June 29 th – July 1 st
LOCATION:	Newtown Square, PA
ENTRY FEE:	\$ 500
AGE/CLASS	16U Class A
ENTRY DEADLINE:	6/15/2012 or when maximum of 12 teams entries received The tournament fee must be <u>in the hands of the tournament director by this deadline.</u>
ENTRY FORM:	Make checks payable to “Chaos Softball” and forward to the tournament director with your payment.
ELIGIBILITY:	<u>ONLY ASA of PA</u> registered teams are eligible to participate Teams must be registered through REGISTERASA. To register with ASA go to www.paasa.org
FORMAT:	4GG – Teams will be contacted via email and/or phone with pool play schedule. All brackets will be posted at tournament site
RULES:	2012 ASA Rules will be utilized
HOTEL INFO	
FIELD DIRECTIONS:	Will be sent out with Pool Play schedules
TOURNAMENT DIRECTOR:	Name: Brian Dudley Address: 45 Station Road Glen Mills, PA 19342 Phone: Cell – 610-368-9874 Email: Engine592@aol.com
REQUIRED DOCUMENTATION:	Required at Check-in: 1. Proof of ASA Registration & Insurance 2. ASA Photo IDs 3. Official ASA Championship roster: <ul style="list-style-type: none"> • Must be generated through registerASA – no handwritten rosters accepted • Signature of parents required for all players • Signature of team's District/Commissioner or designee 4. Proof of ACE certification & ASA Background check for current year
AWARDS:	1 st & 2 nd Place: Trophy & Individual Awards
ADVANCE TO:	1 st Place team: 16U ASA/USA National Championships in Montgomery, AL – 7/29-8/5/2012 2 nd Place team: 16U Class A Eastern Nationals in York, PA – 8/1-8/5/2012 Additional berths to 16U Class A Eastern Nationals may be awarded depending on total number of participating teams.
SPECIAL FIELD RULES:	At least one ACE certified coach must be present during all games All Adult team personnel must have a current ASA background check

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**Chaos Softball 16U ASA/USA Class A National Qualifier
June 29th – July 1st – Newtown Square, PA**

Team Name _____

Managers Name _____

Address _____

City _____ **State** _____ **Zip** _____

Home phone # () - _____ **Cell Phone:** () - _____

Email _____