## FORT DODGE GIRL'S "SURVIVOR WEEKEND" FAST PITCH TOURNAMENT

12 & UNDER DIVISION JUNE 9 - 11, 2006

## Home of the Girls High School State Softball Tournament

TOURNAMENT DETAILS: 12 AND UNDER DIVISION

9 Games Guaranteed (weather permitting)

(a "bye" is considered as one game)

ASA rules apply

Run rules: 15 after 3 innings; 8 after 5 innings

Team pairings will be sent by mail

Roster limited to 15 players

All teams must be ASA individually registered — Contact the ASA Office in Grinnell @ 641-236-5766 to receive registration forms. The individual registrations are required later in the summer for any team entering a state tournament. This way of registering and insuring the player is the best way to cover everyone involved with the game.

**ENTRY FEE & DEADLINE:** \$350.00 (Fort Dodge will supply the game balls)

May 30, 2006

**TOURNAMENT SITE:** \*Harlan and Hazel Rogers Sports Complex

"Come play on the Fields of Champions"

**TO ENTER:** We will **NOT** accept telephone notification. Entry will be on a first come

first serve basis determined by receipt of entry form and entry fee.

Detach entry form and send with entry fee to:

Fort Dodge Girl's Fast Pitch Association

c/o Janell Birnbaum

P.O. Box 114

Fort Dodge, Iowa 50501

	Additional informati Jeff Donnelly, Tourn Telephone: 515-95 E-mail: jdonnelly@d	5-2748	by contacting:	
OVERNIGHT STAY:	Below are some motels/hotels in the area			
HOTEL: Best Western Starlite Village Budget Host Inn Comfort Inn Country Inn by Carlson Holiday Inn Super 8 (Ft. Dodge) Days Inn	TELEPHONE: 515-573-7177 515-955-8501 515-955-2259 515-955-3621 515-576-8788 515-576-8000		Pool, Hot Tub, C/B'fast, Laundry	
ENTRY FEE SHALL ACCOMPANY REGISTRATION  MAKE CHECKS PAYABLE TO FORT DODGE GIRL'S FAST PITCH ASSOCIATION  (CUT ALONG LINE & MAIL TO ADDRESS ON FRONT)				
JUNE "SURVIVOR WEEKEND" TOURNAMENT Please Print Clearly				
TEAM NAME:				
COACH:			· · · · · · · · · · · · · · · · · · ·	
ADDRESS:				
CITY, STATE, ZIP:				
DAY TELEPHONE:				
EVENING TEL:				
E-MAIL ADDRESS:				
*********	*******	******	*********	
ASSISTANT COACH:				
CITY, STATE, ZIP:				
DAY TELEPHONE:	· · · · · · · · · · · · · · · · · · ·			
EVENING TEL:				

Out of state teams must have travel permit.

NOTE:

E-MAIL ADDRESS: \_\_\_\_\_

Awards will be given to players only. Team rosters and photocopies of birth certificates will be due **BEFORE** first game.

Only 2 Coaches Passes will be provided.