



Application for Hosting Michigan NSA Tournaments – Please Print Page 1

Michigan NSA PO Box 187 Fenton, MI 48430
810-629-9551 FAX: 810-629-2852

Organization Name: _____ Date Submitted: _____

Contact Name: _____ Day Phone: (_____) _____

Contact Address: _____

City: _____ St: _____ Zip: _____

Email: _____ Cell Phone: (_____) _____

Note: Long Standing Tournaments in an area will receive priority. NO tournaments will be run on dates of the MI NSA State.

Dates Requested: _____ 2nd Choice: _____
(IF you wish to begin PLAY on FRIDAY, make sure to list FRIDAY'S DATE as the Start Date)

Age Divisions: _____ Circle Class: "A" Only -or- "B" Only -or- "A/B" -or- Rec
10u / 12u / 14u / 16u / 18u or 23u

Please have NSA Supply a Tournament Director: _____ We will Supply a Tournament Director: _____
(REQUIRES Named TD to attend future meeting in our office)

Have you checked with appropriate people and are SURE that the facilities are available for the above dates? _____

Facilities to be used:

Name of 1st MAIN Complex: _____

TOTAL Number of fields: _____ Number of fields that are Lighted: _____
(Number of teams being accepted will depend on the number of fields and IF any are lighted)

Concession Stand? _____ Inside Bathrooms? _____ Porta-Johns? _____

MAIN

PHYSICAL ADDRESS or Address for MapQuest: _____

Name of 2nd Complex: _____

TOTAL Number of fields: _____ Number of fields that are Lighted: _____

Distance from MAIN Complex: _____ Approximate Drive Time: _____

Concession Stand? _____ Inside Bathrooms? _____ Porta-Johns? _____

Secondary

PHYSICAL ADDRESS or Address for MapQuest: _____

Additional (3rd) Complex: _____

TOTAL Number of fields: _____ Number of fields that are Lighted: _____

Distance from MAIN Complex: _____ Approximate Drive Time: _____

Concession Stand? _____ Inside Bathrooms? _____ Porta-Johns? _____

Name of Tournament: _____ Minimum # of Games: _____

Is this an established tournament? _____ Number of Years being held? _____

Will you charge a GATE FEE? _____ Tournament Entry Fee: _____ Allow Early Discount? _____

Please fee free to submit additional notes on separate piece of paper.



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Organization Name: _____ Date: _____

Application filled out by: _____

1. How many teams do you have in your organization?

_____ 10u _____ 12u _____ 14u _____ 16u _____ 18u

2. How many NSA tournaments IN ADDITION TO YOUR OWN do you expect the teams to participate in?

_____ 10u _____ 12u _____ 14u _____ 16u _____ 18u

3. How many teams do you expect to participate in the NSA State Championships this year?

_____ 10u _____ 12u _____ 14u _____ 16u _____ 18u

4. How many teams do you have that are trying to Qualify for NSA World Series this year?

_____ 10u _____ 12u _____ 14u _____ 16u _____ 18u

5. Would you be interested in hosting a Baseball Player’s Association (BPA) tournament for boys?

_____ NO _____ YES _____ Unsure, will check with others in group

6. How would you utilize the profits your organization would receive if you are awarded an NSA or BPA Sanctioned event?

7. How many of your teams attended the NSA State Tournament last year? _____

8. How many of your teams attended the NSA World Series last year? _____

Comments or issues from last year’s tournament you hosted: _____

Tournament Name: _____ Organization: _____ Trny Date: _____

IF You have been ACCEPTED TO HOST AN NSA/BPA Tournament, please fill out the following & **notify us of any changes:**

1. Do you have **ALL the fields secured** that you listed on page one for the correct dates? _____

2. Do you have enough **bathroom facilities** (additional porta johns if needed) for the dates? _____



3. **Are you supplying a Tournament Director?** _____ I will need the TD's name, address & phone numbers:

They will be required to attend a TD training meeting.

4. What are the **FIELD NAMES or NUMBERS** that will be used at each facility? VERY IMPORTANT to have CORRECT!

Park #1: _____

Park #2: _____

Park #3: _____

5. Do any of the complexes have **lighted fields** that we can utilize if needed? What are the numbers/names of those fields?

6. What **times are the park/facility available to use?** What time can teams enter for warm up - how late can they stay? Some complexes may have a drop dead time everyone needs to be OUT OF THE COMPLEX.... Especially on Sunday.

Friday Open: _____ Friday 1st Game Time: _____ Friday Last Game time: _____ Friday Drop Dead: _____

SATURDAY Open: _____ SAT 1st Game Time: _____ SAT Last Game time: _____ SAT Drop Dead: _____

SUNDAY Open: _____ SUN 1st Game Time: _____ SUN Last Game time: _____ SUN Drop Dead: _____

7. Are there **field restrictions?** Certain Age Groups to be played ONLY on certain fields? Specific fields need to be done prior to others - possibly due to leagues? Certain teams at a complex to do maintenance? ETC....

ANYTHING that would affect scheduling of the tournament. PLEASE USE EXTRA SHEET IF NEEDED - **VERY IMPORTANT!**

Additions Administrative fees will be charged for having to REDRAW or REPOST brackets that have been completed!

8. Do you need 3 Million Field Owner **liability insurance** for the complexes or facilities? YES or NO Price is \$40 If yes, please include Official Name of ALL complexes/school district and address, phone number, and fax # or email.

9. **AWARDS** - MUST include Minimum of 1st & 2nd place individuals for each age group with a sponsor/team award for 1st & 2nd. We can handle the awards for you - the price would be taken from your financial statement.

IF you are doing your own awards, you MUST send us a picture with dimensions prior to the tournament!

Do you want us to handle awards for you? YES or NO

10. Do you want us to supply the **merchandise trailer and tournament shirts** for you if we are available? YES or NO

11. Are you charging **gate fees?** _____ If yes, What are the fees? \$ per day or weekend? per person or vehicle? Senior Discount?

NOTE: Coaches (Up to 3) and Players in uniform CANNOT BE CHARGED GATE OR PARKING FEES! THIS IS NSA National Policy!

12. Have you assigned a **RAIN OUT number?** Phone number: _____

13. Do you have a **HOST HOTEL** you want us to post on the website? Please include name, address, and phone numbers.

14. Do you have **Tournament SPONSORS** you want us to post on the website? Please include information

15. Do you have **Special Events** or fun things for the girls to do during the tournament we can post on the site?

Signed by: _____ Signature: _____ Date: _____