



Baseball Tournament Site Information (COMPLETE ONE FORM PER TOURNAMENT BEING HOSTED)

_____ **District**
_____ **Region**
_____ **Semi-State**
(check one above)

District/Region/Semi-State Number _____

RETURN IMMEDIATELY

_____ My school has accepted the designation as host of the tournament mentioned above for the 2008 tournament listed above.

The Manager will be-
Name: _____
School _____
Position: _____
Shipping Address: _____
City/State/Zip: _____
Work Phone: _____
Home Phone: _____
Fax: _____
Cell Phone: _____
E-mail Address: _____
Tournament Site if not at
this school _____

The seeding/draw meeting for this tournament will be on

What day of the week? _____
What date? _____
What time? _____
What site? _____

_____ The information on file is not correct. The host school should be .

By signing this form, I agree that the site where this tournament is to be held meets the site specifications as detailed by the Baseball Advisory Committee and approved by the Board of Control of the KHSAA (see <http://www.khsaa.org/baseball/sitespecifications.pdf>)

Submitted by _____

Signature _____

Date _____