



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 2009 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 _____

For District or Region Tournaments, 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>) By signing this form, the site also agrees that unless authorized under legitimate scratch authority through a specific member school, the venue and its officers, directors and supervisors have no authority in the assignment of tournament umpires and specific requests for inclusion or exclusion will not be honored.

Submitted by _____ Signature _____

Date _____