

King of Kings **Baseball Tournament**

Tournament Date:

Team Name:								-
Manager Name:								_
Mailing Address:								_
Phone #:		_ Email	-					
Contact Person:								
DIVISION: circle one: 8U	9U	10U	11U	12U	13U	14U	15U/16U	18U
Cash checks or money	order	s can h	e made	navahl	e to: K	ing of k	ings Raseha	II Tournaments

ROSTERS. PLAYER'S BIRTH CERTIFICATES. LIABILITY/MEDICAL RELEASE FORMS. PROOF OF INSURANCE NEED TO BE CHECKED IN AT TOURNAMENT SITE ONE HOUR BEFORE INITIAL GAME TIME.

Teams will not be allowed to withdraw or receive a refund after the tournament is considered full or after the brackets have been published, whichever comes first (unless the tournament is cancelled due to weather conditions or some other reason; teams that have played only one game before any cancellation will receive a 50% refund, but teams completing 2 or more games will not be entitled to a refund of any kind). Tournament Application without payment will not guarantee your team's placement in the tournament. In the case of a cancelled tournament by City of Hanford Park and Recreation Department, King of Kings Baseball Tournaments has no responsibility other than to refund the entry fee. By signing below the team manger agrees to hold all terms, conditions, and obligations explained in the Hanford Softball Complex and King of Kings Baseball Tournaments tournament rules, regulations, and player guidelines.

Manager Signature:	Date:

***Please mail Tournament Application/Commitment Form and payment to:

Mail Payment to: King of Kings Baseball Tournaments 1077 Paradise Dr. Lemoore, CA 93245 (559) 707-0211