

Adult Non-Championship Play
Sanctioning Agreement

Amateur Softball Association



**THE NATIONAL GOVERNING BODY
OF SOFTBALL**

South Florida ASA

Amateur Softball Association of South Florida, Inc. – a tax-exempt organization

Serving Broward, Martin, Miami-Dade, Monroe, Palm Beach, and St. Lucie Counties

5201 S.W. 101st Terrace
Cooper City, Florida
33328-4949

954-600-7891 (M-F, 8AM-5PM) * 954-252-7656 (fax)



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TOURNAMENT INFORMATION

This agreement is made and entered into between *Amateur Softball Association of South Florida, Inc.* (hereinafter referred to as "*SFASA*"), and

| | |
|---------------------------|--|
| Host Organization: | |
| Host Official: | |
| Address: | |
| City, State, Zip: | |
| Business Phone: | |
| Fax: | |
| Cellular: | |
| Email: | |

(Hereinafter referred to as the "*HOST*").

In consideration of *SFASA* granting the *HOST* the right to sponsor and conduct an ASA Non-Championship Play Invitational Softball Tournament, and all other rights and benefits associated therewith, the *HOST* hereby agrees to the following:

| | |
|---------------------------------|--|
| Tournament Name: | |
| Location: | |
| Number of Fields: | |
| Tournament Date(s): | |
| Division/Classification: | |

Signature of *HOST* Official: _____ Date: _____

Approved by the South Florida ASA Commissioner, or Designee

Signature of ASA Official: _____
South Florida ASA Official: Moris L. Uhler, Commissioner
Date: _____

FEES

If the *HOST* is a recreational adult softball organization and all players within the entire recreational adult softball organization's recreational league are individually registered with *SFASA*, then the *HOST* will submit a payment payable to *South Florida ASA*, the amount to be zero dollars (\$-0-) per team attending the tournament.

If the *HOST* is a recreational adult softball organization and all teams are registered with *SFASA*, then the *HOST* will submit a payment payable to *South Florida ASA*, the amount to be five dollars (\$5.00) per team attending the tournament.

OTHERWISE, the *HOST* will submit a payment payable to *South Florida ASA*, the amount to be ten dollars (10.00) per team attending the tournament.

The *HOST* will submit all payments to *SFASA* within five (5) days after the completion of the tournament. In addition, the *HOST* will also provide the bracket sheets and final standings of the tournament to verify the number of teams attending the tournament.

ELIGIBILITY OF TEAMS

The **HOST** agrees that any and all questions of qualification and eligibility shall be taken from the **HOST**'s developed roster form. However, if the **HOST** wishes to, the **HOST** may use the ASA roster as their official roster. **ALL TEAMS MUST BE ASA REGISTERED.** If a team is not ASA registered, then an additional ten dollars (\$10.00) cash will be collected from each non-registered ASA team so the team can be registered for insurance purposes only. Please use the invoice on the last page.

FIELD MAINTENANCE

The **HOST** agrees to maintain the fields throughout the tournament in accordance with the *Official Rules of Softball*. Since the tournament is not being played under Championship Play rules, the use of temporary fences is at the discretion of the **HOST**.

OTHER EXPENSES OF HOST

In addition to the sanctioning fee, the **HOST** agrees to pay all other general expenses incurred while conducting the tournament. Such expenses include, but are not limited to, the following:

- **Insurance:** To obtain and/or maintain at least \$2,000,000 in General Liability Insurance for the event. Said policy or policies shall include **SFASA** as additionally insured. Such insurance is available through Bollinger Insurance, at www.bollingerasa.com, and is made available to you as a part of this sanctioning agreement. Proof of insurance must be provided to **SFASA** no later than one (1) week prior to the start of the tournament.
- **Umpires:** After conferring with the **South Florida ASA** Umpire-in-Chief, the **HOST** will assign its own Umpire-in-Chief, who will secure, schedule, and pay all umpires. **Only ASA registered umpires are allowed.** For any umpire not registered, the **HOST** will collect the umpire registration fee from the umpire along with having the umpire complete an *Umpire Registration Form*, which can be found on the **South Florida ASA** website at www.southfloridaasa.com. Both the registration fee(s) and form(s) will be forwarded to **SFASA** along with the tournament brackets and sanctioning fee.
- **Game Balls:** Game balls must be ASA approved for the division/classification of the tournament.

TOURNAMENT FORMAT

The **HOST** may utilize any format of seeding play into any type of elimination bracket play. The format and use of a time limit must be published in advance. **AT NO TIME** will the winner of a classification be awarded a berth into any *ASA National Championship Finals Tournament*.

ADVERTISING

The **HOST** will prominently display, or indicate on all press, radio, and television releases; plus all advertising on billboards, showcases, tickets, or other similar materials, the name **Amateur Softball Association** and **South Florida ASA** to identify the tournament.

SOUVENIRS

Any souvenir items with the ASA logo to be sold at the tournament must be approved in advance by **South Florida ASA**.

INCOME OF HOST

Any and all income derived by the *HOST* shall remain with the *HOST*. Such income shall included, but not limited to, the following:

- Tournament Entry fee;
- Gate fees (except for properly identified ASA officials and/or umpires, who shall be admitted free of charge);
- Commission fees earned from hotels/motels, or any other commissions earned;
- All food concession income;
- All vendor income fees;
- Etc.

ENTIRE AGREEMENT

This agreement constitutes the entire understanding between the parties concerning the subject matter, and supercedes all prior oral and written agreements. No modification or amendment of the agreement may be made unless in writing and signed by the parties. This agreement shall be deemed a Florida contract and subject to the laws of the State of Florida.

NOTICES

Any notices required under this agreement shall be deemed sufficiently given if made by certified mail, return receipt requested, to the address of the parties reflected within this agreement.



TM

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ADULT NON-CHAMPIONSHIP PLAY TOURNAMENT REGISTRATION INVOICE

Registration Fee: \$10.00 Cash

Please Print or Type Clearly

| | |
|------------|--|
| Team Name: | |
| City: | |
| State: | |

Team Classification (check 1 box): Men's Women's Coed

Since your team is not registered with ASA, the purpose of the registration fee is so that your team can be registered with the ASA by **South Florida ASA**. *The registration of your team is for this event only.*

I hereby understand that this fee does not register my team with any local ASA association and that this fee is only for this one event.

Name of Coach (Print): _____

Signature: _____

Date: _____

SFASA Use Only:

Entered: _____

Number: _____