

**2009**  
**UNITED STATES SPECIALTY SPORTS ASSOCIATION**  
Presents  
**TEXAS/NEW MEXICO YOUTH SLOW PITCH STATE TOURNAMENT**  
**CLOVIS, NEW MEXICO**  
**JULY 17-JULY 19, 2009**

**DIVISIONS OF PLAY**

Any Texas USSSA **registered and qualified** team in the following divisions.

<i>Girls 6 &amp; Under T-Ball</i>	<i>Boys 6 &amp; Under T-Ball</i>
<i>Girls 8 &amp; Under</i>	<i>Boys 8 &amp; Under</i>
<i>Girls 10 &amp; Under</i>	<i>Boys 10 &amp; Under</i>
<i>Girls 12 &amp; Under</i>	<i>Boys 12 &amp; Under</i>
<i>Girls 14 &amp; Under</i>	<i>Boys 14 &amp; Under</i>
<i>Girls 16 &amp; Under</i>	<i>Boys 16 &amp; Under</i>
<i>Girls 19 &amp; Under</i>	<i>Boys 19 &amp; Under</i>

**ENTRY FEE AND ENTRY FORM**

All Teams must abide by their local USSSA Area Rules as administered by your State Director in qualifying and participating in this event.

Make sure your entry form is completely filled out and returned to your respective Director.

*West Texas State Director*  
**Bobby Drum**  
*4435-76<sup>th</sup> Street*  
*Lubbock, Texas 79424*  
*H (806) 799-5614*  
*W (806) 792-7111*  
*F (806) 792-0919*

*Clovis Area Director*  
**Roger Jackson**  
*309 Commerce Way*  
*Clovis, NM 88101*  
*W (575) 762-8977*  
*F (575) 769-0826*

**Enclose a cashiers check or money order payable to Clovis USSSA in the amount of \$250 for your entry fee.** *Your teams completed entry form and entry fee must be received together – NO entry will be accepted without entry fee.*

**ROSTER FORM**

An **official USSSA Youth Roster Form** must be posted online at [www.ussa.com](http://www.ussa.com), completed and approved by your State Director and mailed with your entry fee and entry form. **This roster must be the one your team qualified with.** *Team managers are responsible for player's identification and age verification at all times.*

**ENTRY DEADLINE**

Friday, July 10, 2009 is the FINAL deadline for receiving entries. Please mail your entries to above Directors. Your entry to your State Director should include:

*\$250 Cashiers Check or Money Order*  
*Entry Form*  
*USSSA Roster Form with signatures*  
*Travel & Team Information Sheet*  
*Copy of Qualification Form*



**HOTEL ACCOMODATIONS**

A list of participating hotels is enclosed. Please patronize these hotels for better rates, checkout times, and discounts around Clovis. *For further information please contact Clovis USSSA.*

***FOR MORE TOURNAMENT INFORMATION***

***[www.clovisusssa.com](http://www.clovisusssa.com)***

**UNITED STATE SPECIALTY SPORTS ASSOCIATION**

**TEXAS/NEW MEXICO USSSA  
ENTRY FORM**

*(circle) Girls Team Boys 6u 8u 10u 12u 14u 16u 19u*

**NAME OF TEAM (as registered with USSSA)** \_\_\_\_\_

**OFFICIAL USSSA REGISTRATION NUMBER** \_\_\_\_\_

**CITY & STATE TEAM IS FROM** \_\_\_\_\_

**MANAGER'S NAME** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

**MGR. HOME PHONE** \_\_\_\_\_ **WORK PHONE** \_\_\_\_\_

**TEAM SPONSORED BY** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**CURRENT SEASON RECORD: WON** \_\_\_\_\_ **LOST** \_\_\_\_\_

**CURRENT SEASON CHAMPIONSHIPS WON:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enclosed is a cashier's check or money order in the amount of \$250 for entry fee.

Signed \_\_\_\_\_  
*Team manager*

**TRAVEL INFORMATION**

**NAME OF TEAM** \_\_\_\_\_ **Division** \_\_\_\_\_  
**REGISTRATION NUMBER** \_\_\_\_\_  
**CITY AND STATE** \_\_\_\_\_  
**MANAGER'S NAME** \_\_\_\_\_  
**MGR ADDRESS** \_\_\_\_\_  
**TEAM E MAIL ADDRESS** \_\_\_\_\_  
**HOME PHONE** \_\_\_\_\_ **WORK PHONE** \_\_\_\_\_  
**DATE OF ARRIVAL** \_\_\_\_\_ **TIME OF ARRIVAL** \_\_\_\_\_  
**HOTEL ACCOMODATIONS** \_\_\_\_\_ **# OF ROOMS** \_\_\_\_\_  
**TRAVELING BY** \_\_\_\_\_  
**NUMBER TRAVELING** \_\_\_\_\_

**TEAM INFORMATION**

**TEAM UNIFORM COLORS** \_\_\_\_\_  
**HIGHLIGHTS OF SEASON** \_\_\_\_\_

\_\_\_\_\_  
**TEAMS PREVIOUS ACCOMPLISHMENTS IN USSSA** \_\_\_\_\_

\_\_\_\_\_  
**CAPSULE SUMMARY OF OUTSTANDING PLAYERS (MVP, ALL TOURNEY, ETC.)** \_\_\_\_\_

\_\_\_\_\_  
**SEASON RECORD: WON** \_\_\_\_\_ **LOST** \_\_\_\_\_

**WHEN & HOW DID YOU QUALIFY** \_\_\_\_\_  
**CURRENT USSSA RANKING** \_\_\_\_\_

**MANAGER'S SIGNATURE** \_\_\_\_\_

*PLEASE RETURN THIS SHEET AS SOON AS POSSIBLE TO:*

*Roger Jackson  
309 Commerce Way  
CLOVIS, NM 88101  
575-762-8977 FAX 575-769-0826*