NSF MSF 118 12th Ave. N. South St. Paul, MN 55075

(651) 451-3140 www.msf1.org



## Dear Manager:

On the reverse side is the entry form for the NSF ♦ MSF Masters State Championships which your team may be interested in. You may also register online at at www.msf1.org.

Once we receive your entry you will be forwarded a roster to complete which is due at tournament check-in.

Please note the age cut off date on the reverse side.

As in the past NSF • MSF Masters State Championships will be conducted in a quality manner at many of the top facilities in the state.

If questions arise, please contact perry@msf1.org or call (651) 451-3140 (2pm-6pm CT).

Sincerely,

Perry Coonce State Commissioner



- See Reverse -



## MINNESOTA SPORTS FEDERATION MASTERS SLOW STATE TOURNAMENT ENTRY FORM



## YOUR TEAM IS INVITED....

TO PARTICIPATE IN THE 35 AND/OR 45 & OVER MEN'S SLOW PITCH STATE TOURNAMENT.

DIVISIONS		DATE		SITE
<b>NSF</b> ♦MSF Men's I	Masters 35 & 45 Over Slowpitch State Tourname	ent Augus	st 7	Sauk Rapids
ENTRY FEE:	Slowpitch - \$200.00			
STRUCTURE:	Double Elimination/Consolation or Round Robin/Playoff - Three Game Guarantee			
ENTRY DEADLINE:	July 16th			annound a
ELIGIBILITY:	Players must live or work in the state of Minnesota.			
	Players do not have to play together as an intact team during the regular season. They may be formed specifically for this tournament. Official roster form must be turned in at tournament checkin. Teams may "bat the bench".			
	Teams shall be composed of players who are 35 and over as of December 31 of the current year.			
ROSTER LIMIT:	20 players			
AWARDS:	Trophies will be presented to the first, second and third place finishers in tournaments of eight or are teams and first and second place in tournaments of seven or less teams. First place teams will receive a championship team banner and plaques. Runner-up receives team plaque.			
UMPIRES:	NSF ♦ MSF certified umpires shall be employed on all contests.			
Sports Federation Masters State Tournament Entry Form    TEAM NAME SPORTS COMMUNITY				
TEAM MANAGER ADDRESS				
CITY & STATE	ZIP PHC	NE H ( )	W	( )
E MAIL ADDRESS				
DIVISION:	35 & OVER 45 & OVER			
Visa Mastercard Credit Card Number (16 Digits):				
Month/Year Expiration Security Code				
Name as it appears on card Signature				
SEND \$200 ENTRY FEE AND FORM TO: MSF * 118 12th Ave N *South St. Paul, MN 55075 * (651) 451-3140 THE SPORTS FEDERATION RESERVES THE RIGHT TO RETURN ENTRIES WHEN A TOURNAMENT HAS BEEN FILLED. *Note: All credit card purchases incur an additional \$5.00 credit card processing fee.				
TEAMS MAY ALSO ENTER ONLINE AT WWW.MSF1.ORG				