

**NORTHERN CALIFORNIA SENIOR SOFTBALL ASSOCIATION**

**Tournament Directors Contract 2010**

I, \_\_\_\_\_, Location \_\_\_\_\_  
Tournament Director

accept the award of a Northern California Senior Softball Association tournament scheduled for

date: \_\_\_\_\_ age groups \_\_\_\_\_ no. of fields \_\_\_\_\_

My affiliation with NCSSA is NCSSA team manager \_\_\_ NCSSA member \_\_\_ other \_\_\_.

I hereby agree to follow all SSUSA rules of play including the rule addendums of the NCSSA. Special emphasis will be placed on rules 6, 7, 8, 9, and 10 of the addendum.

I agree to check all rosters versus the lineup sheets to ensure that Rule 9 is not being violated.

I agree to provide minimum field maintenance at least twice on each field each day of the tournament.

I agree to make sure there are sufficient and maintained restroom facilities available.

I will make sure outfield grass is cut, batters boxes are in top shape, fields are watered as part of maintenance, and that there are no hazards in the playing area.

I agree to have water in all dugouts if no other source of drinking water is in close proximity.

I will review the NCSSA tournament rules with all umpires and provide them with copies of the rules.

I will turn in the results to NCSSA within 3 days after the tournament.

I will insure that concessions will be available, if not I will place a notice in my flyer of lack thereof.

I understand that non-compliance of NCSSA rules and policies can result in the termination of any further tournament awards from NCSSA.

Enclosed is my tournament fee in the amount of \$25.00 payable to NCSSA.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Return this Contract with Fee to: Hal Feinberg  
225 E Santa Inez #12  
San Mateo, Ca 94401