

# USSSA / Atomic City Sports Tournament Entry Form

Please include all info asked so that we may process your entry more efficiently, Thanks

**Name and Date of tournament entering:**

\_\_\_\_\_

**Team Name:** \_\_\_\_\_

**Age / Division:** \_\_\_\_\_

**Manager or Coach:** \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**Day Phone:** \_\_\_\_\_

**Cell:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**USSSA Team Registration # :** \_\_\_\_\_

**Please list the names of three coaches for gate passes:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Entry Fee:** \_\_\_\_\_

Send check or money order made payable to: **Atomic City Sports**

Mail to:

**Atomic City Sports**

**25 Retreat Place**

**Aiken, SC 29801**

**Managers:** You must have in your possession at the tournament site:

**1. Signed USSSA Roster**

**2. Copy of all players birth certificates**