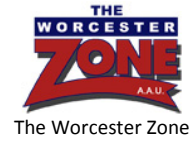




THE STRIKE ZONE SUMMER TOURNAMENT SERIES



2010 TEAM ENTRY APPLICATION

On behalf of our Team, _____, I hereby apply for entry into The Strike Zone’s 2010 Summer Tournament Series. We agree to abide by the rules set forth by the Tournament Committee, and by signing below, I certify that our Team and the participating players, representing our Team in the Tournament, are covered by an approvable and current liability insurance policy. In consideration of our entry to the Tournament, our Team hereby releases The Strike Zone and any of its directors, officers, coaches, agents, affiliates, field hosts, sponsors, and associated personnel from liability for injuries sustained by any of our players or coaches during participation in the Tournament. Additionally, our Team will indemnify and hold harmless The Strike Zone and its directors, officers, coaches, agents, affiliates, field hosts, sponsors, and associated personnel from liability as a result of such injuries.

SELECT TOURNAMENT :

- | | |
|--|--|
| <input type="checkbox"/> 10&U - June 19 and 20, 2010 | <input type="checkbox"/> 13&U - Tourney 1 - June 26 and 27, 2010 |
| <input type="checkbox"/> 11&U - June 26 and 27, 2010 | <input type="checkbox"/> 13&U - Tourney 2 - July 17 and 18, 2010 |
| <input type="checkbox"/> 12&U - July 10 and 11, 2010 | <input type="checkbox"/> 14&U - July 25 and 26, 2010 |
| | <input type="checkbox"/> 15&U - June 19 and 20, 2010 |

TEAM INFORMATION:

Team Name and Age Level: _____

League Name (if applicable): _____

Organization’s and/or Team’s Website Address: _____

TEAM MANAGER INFORMATION (this will be used as the primary point of contact):

Team Manager’s Name: _____

Street Address: _____

City / State / Zip: _____

Email(s): _____

Phone Number(s): **Home:** _____ **Cell:** _____

ENTRY FEE: \$495.00 – please make check payable to “The Strike Zone”. Entry application and fee are accepted on a “first-come, first-serve” basis. Therefore, if your team wishes to participate, please submit the entry application and fee at your earliest convenience, as space is limited to 8 teams per Tournament date.

TEAM REPRESENTATIVE: Please print your name, sign and provide your Team title below.

Executed under seal on _____, 2010.

Signature: _____

Print Name: _____

Team and Title: _____

**Please mail Team Entry Form and fee to The Strike Zone; 10 Mann Street; Worcester, MA 01602
Additional information is available at www.kzonecages.com.**