Manager's Phone Numbers:						
(Day)						
(Night)						

Texas District 19 Little League North San Antonio City Championships Tournament Team Eligibility Affidavit Baseball & Softball

Coach's Phone Numbers:	
-	-
	_

	(Name of League)	Baseball	(City)	 Softba	Texa	
Minor B		Junior Baseball Senior Baseball		Minor Softball Major Softball	Consu	Junior Softba Senior Softba	
Name of	Player	Street Address		City	Zip	NAME OF REGULAR SEASON TEAM	DATE OF BIRTH Month-Day-Year
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
	16 players (including the two	additional players), a manager and	2 coaches shall be I	isted or accompany team.			1
15.							
6.							
Name of (A) Manager	, (B) & (C) Coaches	STREET ADDRESS	CITY	STATE	ZIP	Daytime I Telephone	NAME OF REGULAR SEASON TEAM
A.							
В.							
C.							
League Presi By my signature be persons listed on the League Internation at least 8 games of	nis affidavit are true a al Headquarters. I fu f the regular season. aining shall be decide	e names, dates of birth a and correct, and have b irther certify that all the I agree to accept the de ed by the District Admini	een substanti players, mana ecision of the istrator at a m	ated by legal docu ager and coaches l District 19 Tourna leeting with both pa	mentation of listed have presed ment Commarties presed	or statement in lieu to participated in the d nittee as final and bi nt in San Antonio, T	hereof from Lit ivision noted fonding. Whatev
	· ·	dent's Name					See
	Signature _				ate		Instructions
	Street Addres	ss:					on Reverse Side
	Citv:		9	state: Texas Zip:			Side

Team Manager's Signature

Date: .

Team Manager's Review:

Division	:			_	NOTE: THE TOURNA RULE BOOK IS PROV	MENT DIR	ECTOR				
					REFERENCE TO OFF	ICIAL PITO	CH COU	NT APPLICABL	E TO THIS	S DIVISION.	JK
Date of Game	Level of play*	Pitcher	League Age	Number of Pitches	Name of Opponent		Opp	Signature Official Scorek or Pitch Cou	eeper	Next Date for Pitching Eligibility	Initia by Mgr
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											-
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nanager	s or coaches	only when and			ACEMENT, MANA e made. One time replacer				District A	eport all ejec Administrato ion is resolv	r as s

LINE	NAME OF MANAGER/COACH	COMPLETE ADDRESS	REGULAR SEASON TEAM	SIGNATURE OF DISTRICT ADMINISTRATOR OR TOURNAMENT DIRECTOR

INSTRUCTIONS

Coaches Meeting. The Team Manager will present these two (2) copies to the Tournament Director at the Mandatory Manager and Coaches Meeting.

One (1) copy will be used by the Tournament Director during the Tournament.

One (1) copy will be given to the District Administrator..

(Name of League & Team)

Two (2) copies must be prepared and certified to by the League President and given to the Team Manager prior to the Mandatory Mangers and

TOURNAMENT PITCHERS' RECORD - SOFTBALL

The record of each pitcher used in a tournament game shall be entered below This record must be completed immediately following each game as the eligibility of each pitcher will be determined by it.

Note: Please refer to T Rules in the Softball Rulebook for pitching rules for each division.

Date of Game	Name of Pitcher	Number of Innings Pitched	Name of Opponent	Score Own Opp.		Signature of Tournament Director
					977	

REPLACEMENT, MANAGER or COACH

Note: Report all ejections to the District Administrator as soon as the situation is resolved.

List managers or coaches only when and as replacements are made. One time replacements need not be reported herein. NOTE: Temporary replacement of a manager or coach need not be recorded below

The Team Manager or League President must certify that such replacements is within the regulations for this tournament and the replacement has been made with the approval of the League President and/or Board of Directors of this Little League.

LINE	NAME OF MANAGER/COACH	COMPLETE ADDRESS	REGULAR SEASON TEAM	SIGNATURE OF DISTRICT ADMINISTRATOR OR TOURNAMENT DIRECTOR