2015 ASA MSP SENIORS

OPEN WEST NATIONAL WARM-UP

PCC-Rock Creek Sports Complex



Portland, Oregon June 6 - 7, 2015 By Invitation





Team Entry Fee: \$200 - Maximum of 32 Teams

5 game guarantee (3 Pool Play & 2 in Championship Play)

Combined Pool Play w/ Run Allowances & Bracket Games Per Age/Classification or Combined

2 Umpire Mechanics for All Games - All Senior ASA Rules Apply

Tournament Directors: Mike Wells - Heidi Wells email: heidi@mvwinsurance.com

Top Team in @ Age/Classification will have Entry Fee paid to the 2015 ASA MSP Senior West Nationals Sept. 2-7, 2015 - Hood View Sports Complex/Happy Valley, OR

PCC-Rock Creek Sports Complex - 17705 NW Springville Rd, Portland, Oregon: has 4 synthetic turf, illuminated fields, concessions, restrooms, digital scoreboards, bleachers for spectators, play area for kids, and shaded dugouts, 60 minute drive to Mt. Hood or the Oregon Coast, Golf Courses, close to hotels, restaurants & shopping with NO sales Tax and surrounded by Oregon Wine Country.

Contact Info: Phone: (503) 445-2420 - email: mrsoftball@mvwinsurance.com

Web: www.oregon-asa.com



www.facebook.com/OregonASAsoftball





2015 ASA MSP SENIORS OPEN WESTERN NATIONAL WARM-UP PCC-ROCK CREEK – PORTLAND, OR JUNE 6 – 7, 2015 TEAM REGISTRATION FORM

(Please Type or Print)

Team Name:	
Coach's Name:	
Street Address:	
City State Zip Code	
Phone Numbers: (H)* Cell	
* E-mail	
* Required information in order to register team. Preferred Phone Number To Be Reached At:	
Backup Contact:	
Name:	
Street Address:	
City State Zip Code	
Phone Numbers: (H) * Cell	
* E-mail	

Receipt of registration fee and entry form is guarantee of a spot in the 2015 tournament. Entry fee is \$200.00 USD.

Make check out to Mr. Softball, Inc. or Credit Card – just fill out C.C. Form

Mail to: Oregon ASA - Cell Number: (503) 329-0129 - or Heidi: (503) 445-2420

7412 SW Beaverton-Hillsdale Hwy. #112, Portland, OR 97225

E-Mail: mrsoftball@mvwinsurance.com

Fax: 503-291-1487



CREDIT CARD AUTHORIZATION

2015 ASA MSP SENIORS OPEN WESTERN NATIONAL WARM-UP PCC-ROCK CREEK – PORTLAND, OR JUNE 6 – 7, 2015

(Please Type or Print)

First	Middle	Last
Street Address:		
City	State	*Zip Code
Phone Numbers: (H)	* Cell
* E-mail		
Credit Card Informat	ion:	
Credit card payment	for the tournament reg	gistration can be made by Visa or MasterC
I am paying by: Visa _	MasterCard	AMX Discover
Credit Card Number:		
Card Number Exp. Da	te:	-

Entry Fee: \$200.00 USD

Note: There is a \$10.00 processing fee that will be added onto the payment. (\$210)

Team Registration Form Must Be Sent Along With This Credit Card Payment Form!

Mail to: **Oregon ASA** - Cell Number: (503) 329-0129 – or Heidi: (503) 445-2420 7412 SW Beaverton-Hillsdale Hwy. #112, Portland, OR 97225

eMail: mrsoftball@mvwinsurance.com Fax: (503) 291-1487 : Secure and Confidential Fax & email!