



**SOUTHERN CALIFORNIA MUNICIPAL ATHLETIC FEDERATION**  
**OFFICIAL ENTRY FORM - SCMAF SOFTBALL TOURNAMENT SERIES**

PLEASE TYPE OR PRINT LEGIBLY



Team Name \_\_\_\_\_

Team Type: MEN

Manager's Name \_\_\_\_\_

Phone \_\_\_\_\_

Cell \_\_\_\_\_

Email address \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip

**MANAGER, PLEASE READ CAREFULLY**

Type or print clearly the roster of players in the column below. Please mark "X" to left of added player's name on roster. Any added player to your league roster must be from the same city program as your team and be of equal or lower caliber. Managers must make sure that all eligible players who may participate in the Tournament series are listed on this roster. Please check the SCMAF rulebook for complete SCMAF Tournament rules.

**PLEASE PRINT OR TYPE NAME AND INFORMATION**

"X" if Added Player	Print or Type Name	Date of Birth	# League Games Played Weekly	# of SCMAF Tournaments Played in Last Year
_____	1. _____	_____	_____	_____
_____	2. _____	_____	_____	_____
_____	3. _____	_____	_____	_____
_____	4. _____	_____	_____	_____
_____	5. _____	_____	_____	_____
_____	6. _____	_____	_____	_____
_____	7. _____	_____	_____	_____
_____	8. _____	_____	_____	_____
_____	9. _____	_____	_____	_____
_____	10. _____	_____	_____	_____
_____	11. _____	_____	_____	_____
_____	12. _____	_____	_____	_____
_____	13. _____	_____	_____	_____
_____	14. _____	_____	_____	_____
_____	15. _____	_____	_____	_____
_____	16. _____	_____	_____	_____

I, the undersigned Team Manager, declare this team meets all the rules and regulations set forth by the SCMAF Softball Tournament Rules Committee. I also acknowledge my responsibility in submitting fees charged to enter the SCMAF-Elite Softball Tournament and paying those charges accruing. **MANAGERS: ALL FINANCIAL DISPUTES WILL BE SETTLED AT COUNTY OF LOS ANGELES, RIO HONDO COURT.**

**PLEASE COMPLETE THE FOLLOWING**

1. What city/agency softball league is the majority of this team currently playing? \_\_\_\_\_
2. What Division does your team play in? \_\_\_\_\_ Number of teams in your division? \_\_\_\_\_
3. Has your team played in a SCMAF Softball Tournament before under a different name? \_\_\_\_\_ Team name? \_\_\_\_\_

Name of League Director in charge of the Softball League \_\_\_\_\_

Tournament Site/Date \_\_\_\_\_

Signature of Team Manager \_\_\_\_\_ Date \_\_\_\_\_