

## ORDER FORM FOR STATE TOURNAMENTS

This is our request to host a Texas Teen-Age Baseball or Softball State Tournament. *If awarded a tournament, we shall abide by the TTA rules and regulations, agree to utilize the brackets provided, use the designated approved official TTA baseball/softball and abide by all TTA Tournament Rules. We certify that we have adequate facilities to host the tournaments we request, such as field conditions and dimensions, lighting, restrooms, bleachers, PA system, and volunteer staffing. We also certify there are adequate motels and restaurant facilities.*

**If we are requesting a State Tournament, we certify that we will send a representative to the current year's State Meeting of TTA.**

We understand the DEADLINE FOR APPLYING FOR A STATE TOURNAMENT IS AUGUST 1ST.  
WE CERTIFY WE HAVE MET THAT DEADLINE.

Affiliate Name	Host City	Signature of Officer	
Home phone	Cell Phone #	Office phone	Fax #
Email	Mailing Address		

**LEAGUES AVAILABLE IN TTAB**

(Boys 6U T-Ball) (Boys 8U Machine Pitch) (Boys 8U Coach Pitch)  
 (Boys 9U) (Boys 10U Tight Base) (Boys 10U Open Base)  
 (Boys 12U Tight Base) (Boys 12U Open Base)  
 (Boys 14U) (Boys 15U) (Boys High School Eligible)

**LEAGUES AVAILABLE IN TTAS**

(Girls 6 U T-Ball) (Girls 8U Coach Pitch)  
 (Girls 8U Machine Pitch) (Girls 10U) (Girls 12U)  
 (Girls 15U) (Girls High School Eligible)

**TTA Baseball  
Requests  
TOURNAMENT  
CHOICE**

**TTA Softball  
Requests  
TOURNAMENT  
CHOICE**

1st _____	1st _____
2nd _____	2nd _____
3rd _____	3rd _____

Total Number of Fields: \_\_\_\_\_

Number of Fields with Lights: \_\_\_\_\_

Number of Fields with Grass Infield: \_\_\_\_\_

Number of Fields with Dirt Infield: \_\_\_\_\_

Number of Fields with Scoreboards: \_\_\_\_\_

Number of Hotels in area: \_\_\_\_\_

Number of Fields that will be used for the tournaments awarded: \_\_\_\_\_

Can you play games during the day/evening or both: \_\_\_\_\_

Photographer during the Tournament: \_\_\_\_\_

Tournament T-Shirts Available: \_\_\_\_\_

Do you plan to have opening ceremonies \_\_\_\_\_

EMS or Ambulance Available: \_\_\_\_\_

Do you have adequate restroom facilities/#: \_\_\_\_\_

\_\_\_\_\_  
Affiliate Name

Do you plan any extra curricular activities for anyone attending your tournament? \_\_\_\_\_

Does the community help support your tournament any manner (ex. Chamber, City, Economic Development Groups)?

***IF YOU HAVE SELECTED A TTA TOURNAMENT DIRECTOR, PLEASE SUPPLY INFORMATION: (PRINT)***

_____ Tournament Director	_____ Address	
_____ Town	<b>TX</b> _____ Zip	_____ Cell #
_____ Home	_____ Office	_____ e-mail address

**Note:** The fee for a state tournament is \$1,000.00. If your affiliate is awarded a tournament then an invoice will be sent to your affiliate contact. Please see tournament guidelines and the TTA rulebook for the requirements for participants' awards.

**SEND APPLICATION TO:  
TTA, 114 CENTER AVE., SUITE 202, BROWNWOOD, TX 76801  
Fax 325-600-4612**