

USA SOFTBALL OF NORTH DAKOTA

STATE TOURNAMENT PICKUP PLAYER AUTHORIZATION FORM

Team manager must ensure the form is completed before arriving at the tournament and present the completed form to the tournament manager before playing. **A \$20 fee will be assessed if the form is presented at the tournament without players being properly approved and signed off on by a league rep or state official. Those players may not play until a tournament representative has the opportunity to verify their eligibility.**

TOURNAMENT INFO

Dates _____

Classification _____

Location _____

TEAM INFO

Name _____

Classification _____

Manager _____

- Pickup player's classification is from their highest team classification or player database. A player may not be picked up for a team whose classification is lower than the player's highest classification.
- Pickup player must wear the uniform of his or her own team which is listed below.
- Maximum number of own players plus 3 pickup players is 12.
- Pickups must be on state tournament-eligible rosters which are registered with USA Softball of North Dakota. No pick-ups from "League Only" or one-time tournament rosters are permitted.
- **Each pickup player must be approved separately on the signature lines below.**

PICKUP PLAYER 1

Highest classified team pickup player 1 is rostered with:

1. Team name, city, and classification _____

National Player Database Classification (if applicable) _____ Birthdate (**Required for Masters**) _____

Pickup 1 Approved by _____
League Rep or State Official Signature Phone # Date

PICKUP PLAYER 2

Highest classified team pickup player 2 is rostered with:

2. Team name, city, and classification _____

National Player Database Classification (if applicable) _____ Birthdate (**Required for Masters**) _____

Pickup 2 Approved by _____
League Rep or State Official Signature Phone # Date

PICKUP PLAYER 3

Highest classified team pickup player 3 is rostered with:

3. Team name, city, and classification _____

National Player Database Classification (if applicable) _____ Birthdate (**Required for Masters**) _____

Pickup 3 Approved by _____
League Rep or State Official Signature Phone # Date

MANAGER'S STATEMENT: "I hereby acknowledge that the information provided on this form is accurate and accept full responsibility for the conduct of the pickup player(s) listed above."

Team Manager _____
Signature Date

Presented and approved
by Tournament Director _____
Signature Date