

**3<sup>RD</sup> ANNUAL  
JOHNSON CITY  
STARS & STRIKES  
SOFTBALL TOURNAMENT  
JULY 5-8, 2018**

**Tournament Details**

**Age Groups:** 10U, 12U

**Location:** Virginia Ave Park, Northside Park, CFJ Park, Johnson City High School, Johnson City, NY.

**Play format:** Pool play – 4 games guaranteed.

**Team Insurance:** Each team is required to provide their own accidental & liability insurance.

**Rosters:** Rosters are limited to 15 players. All players must have played in the sponsoring league during the current season. No player may appear on more than one roster.

**Eligibility:** A player's eligibility is determined by their age as of January 1, 2018. Players may not have reached their 11<sup>th</sup> birthday by 1/1/2018 for 10u, or 13<sup>th</sup> for 12u. Players will be required to provide a birth certificate upon request.

**Teams:** Open to regular season league teams and all-star teams.

**Awards:** Trophies for 1<sup>st</sup> and 2<sup>nd</sup> place finishers.

**Fee:** \$275 per team.

**Tournament Director:**

John Gaughan phone: (607) 624-3564 email: [jpgaughan3@hotmail.com](mailto:jpgaughan3@hotmail.com)

**2018 JOHNSON CITY  
STARS & STRIKES SOFTBALL TOURNAMENT  
10U & 12U  
THURSDAY, JULY 5<sup>TH</sup> - SUNDAY, JULY 8<sup>TH</sup>**

**Registration Form**

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

Head Coach: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone number: \_\_\_\_\_

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

Regular Season League: \_\_\_\_\_

Age Bracket (Circle One): 10U 12U

Fee: \$275

If you are entering more than one team, please complete and return one registration for each team being entered.

Entry Deadline: June 29, 2018

Make Check payable to: JCYB

Mail completed form and payment to: JCYB  
c/o John Gaughan  
99 Lincoln Avenue  
Johnson City, NY 13790

You may also email your completed roster form to [jpgaughan3@hotmail.com](mailto:jpgaughan3@hotmail.com)

## Team Roster

Team Name: \_\_\_\_\_ Age Level: 12U \_\_\_\_\_ 10U \_\_\_\_\_

**Head Coach:**\_\_\_\_\_ **Cell number:**\_\_\_\_\_

**Assistant Coach:**\_\_\_\_\_ **Cell number:**\_\_\_\_\_

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