



**Barrie & District Girls Softball Association**  
**2019 Select Tournament Registration Form**

**Division / Date**

**Novice – Saturday July 13<sup>th</sup>**

**Application Due By**

**Friday June 14<sup>th</sup>**

**Fees:** OSSTA MEMBERS \$375.00 - NON OSSTA MEMBERS \$425.00

**Payable to: Barrie & District Girls Softball Association  
(BDGSA)**

Please note: No refunds will be issued if a registered team withdraws during the two week period prior to the tournament date, unless a replacement team is found. **Teams are required to provide Proof of Insurance along with their Tournament application.**

**Info:** Tournament slots will be filled on a first come first served basis to maximum of 8 teams. Confirmation of your team's acceptance will be made once the application and payment are received by the BDGSA  
Team rosters due the day of the Tournament  
Each team will be guaranteed 3 games. There will be a Championship game and a Consolation game.

**Draw:** A draw will be done prior to the tournament with the farthest two teams given a first time slot bye.

**Diamonds:** All games will be played at Shear Park & MacMorrison Park

**Facilities:** Both parks have a playground and washroom facilities.

**Awards:** Medallions for the teams placing 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup>.  
MVP medallions for all Round Robin games.

**Contact:** Please email your application to [bdgsa.select@gmail.com](mailto:bdgsa.select@gmail.com) and mail a hard copy and payment to:

**Barrie & District Girls Softball Association**

P.O. Box 28081, Wellington St. Plaza  
Barrie, ON, Canada L4N 7W1

**Email: [bdgsa.select@gmail.com](mailto:bdgsa.select@gmail.com)**



Date Submitted: \_\_\_\_\_ Association: \_\_\_\_\_ OSSTA MEM# \_\_\_\_\_

Division Applied: \_\_\_\_\_ Tournament Date: \_\_\_\_\_

Has select team/player played in any Rep loop games: \_\_\_\_\_ if yes, how many: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

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

\_\_\_\_\_

Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Game schedules and directions will be forwarded to you approximately 1 week prior to the tournament. This tournament will follow OSSTA rules.**

**If you have any questions please contact Mark Murphy at [bdgsa.select@gmail.com](mailto:bdgsa.select@gmail.com)**