

NSA Official Entry Form - National Softball Association Western Nationals
2025 NSA FASTPITCH - WESTERN NATIONALS – Clovis, CA

Send ALL FEES AND PAPERWORK directly to the Western Nationals Director. See Page 2 for Contact Information

ENTRY FEE: \$750.00 for the 8U – 10U Divisions and \$995 for the 12U – 18U Divisions

Five game guarantee. Three pool play into double elimination.

STEP 1: ALL Paperwork & Balance due to the WESTERN NATIONALS DIRECTOR No LATER Than **July 21, 2025!**

Name of Team: _____ Age Group: _____

Please Print or Type: 8u / 10u / 12u / 14u / 16u / 18u

NSA Class: _____ Current NSA Membership #: _____ Overall Record: _____ W _____ L
Enter Class (A, B)

Manager's Name: _____

Managers Mailing Address: _____

City: _____ ST: _____ Zip: _____

Daytime Phone: (_____) _____ Evening Phone: (_____) _____

Email: _____ Cell Phone: (_____) _____

Additional Contact Person Name: _____

Phone: (_____) _____ Other Phone: (_____) _____

WHERE DID YOU QUALIFY? Trny Name: _____ Date: _____ City: _____

SUBMIT to Western Nationals Director: NO LATER THAN ENTRY DEADLINE: July 21, 2025

1. **ENTRY FORM** - Completely Filled Out
2. **PAYMENT:**

- a. **FULL PAYMENT** Make payable to: **Bullets Softball -OR-**
- b. **BALANCE of ENTRY FEE** for the 8u - 10u-12u-14u-16u-18u Make payable to:

Bullets Softball P.O. Box 295 Newman, CA 95360
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3. **NSA Online ROSTER** - Completely filled in, with INDIVIDUAL signatures - Copy of current NSA roster.

4. **TEAM INSURANCE CERTIFICATE** - Copy for current season

REMINDER: **MAKE SURE YOUR NSA ROSTER IS ONLINE prior to 7-21-25!**

I understand as Manager of this team that it is MY responsibility to insure that all of the above information meets all deadlines and requirements.

- I understand that if my deposit or entry is late, or missing information, it may be returned. I understand that it is the responsibility of the Coach/Manager and/or Sponsor for knowing the NSA rules and bylaws. *Ignorance of an NSA rule or bylaw does not negate the penalty. Entry in to any NSA tournament constitutes acknowledgement and agreement to all rules and bylaws of NSA, including the refund policy.*

- I understand that any and all Team Roster issues are to be resolved with my State Director by July 28th **NO EXCEPTIONS**

- I understand that NO players will be added to MY teams Roster at the tournament site, **for ANY reason.**

Manager's Signature: _____ Date: _____

FOR USE BY WESTERN NATIONALS DIRECTOR ONLY: DATE STATE DIRECTOR HAS:

_____ APPROVED ENTRY & CLASS _____ APPROVED ROSTER _____ APPROVED 2 PLAYER ADDITIONS