



## 18<sup>th</sup> Annual Strongsville Memorial Day Weekend Nations Baseball Tournament

**Date:** Fri, May 28 thru Mon, May 31, 2010. (Out-of-town teams will begin play on Sat, May 29)

**Entry Fee:** \$400.00 – three pool games (weather permitting), possible five games (semis and finals), covers cost of umpires, baseballs, and awards. Just show up and be ready to play.

**Nations Baseball Qualifier:** We will have Nations National Championship bids for Select, Elite, and Premier teams. If your team is playing in the Nations Baseball Ohio state tournament in June, this tournament will also fulfill your requirement to play in one Nations qualifier. For more information on Nations Baseball, please visit [www.nationsohio.com](http://www.nationsohio.com).

**Entries Accepted:** No entries will be accepted without your \$400.00 payment. Last year's tournament was filled by early February. You will be e-mailed your acceptance into the tournament within 10 days of receipt of your application. Additional copies of this form may be photocopied for other teams. **Information will be released in March and May, and will be posted on the website ([www.strongsvillebaseball.org](http://www.strongsvillebaseball.org)) only.** No refunds on cancellations after March 1, 2010. In case of rain and fields are not playable, the following refund policy will apply: if 0 games played, \$325 refund; if 1 game played, \$250 refund; if 2 games played, \$125 refund.

**There will be six age divisions:** 9 (No leadoffs), 10, 11, 12, 13, and 14 (60'/90')

**Make check payable to Strongsville Baseball Association and send to:  
Strongsville Baseball Association, P.O. Box 360984, Strongsville, OH 44136**

**Contact: Carl Hoerig (440) 238-9192, ([carl@hoerig.com](mailto:carl@hoerig.com)) or  
Bruce Cicerchi (440) 238-2950, ([bacicerchi@wowway.com](mailto:bacicerchi@wowway.com))**

----- Please return this part to the address above -----

Team Name: \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

*Include area code*

Manager's Name: \_\_\_\_\_ Phone (Day): \_\_\_\_\_

*Include area code*

Address: \_\_\_\_\_ Phone (Night): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Division:      9 yr old (no leadoffs)      10      11      12      13      14 (60'/90')

*(circle one)*

Nations Classification:      Select      Elite      Premier

*(See next page for description)*

League(s) you are playing in for 2010: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ **\*Mandatory\***

## 2010 NATIONS BASEBALL ENTRY FORM

{Nations Baseball Season Starts August 1<sup>st</sup>, 2009 and concludes July 31<sup>st</sup>, 2010}

COMPLETE THIS FORM AND SEND IT TO THE ADDRESS BELOW

TEAM NAME: \_\_\_\_\_

MANAGER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

EVENING PHONE: \_\_\_\_\_

CELL: \_\_\_\_\_

\* E-MAIL: \_\_\_\_\_ {required}

\*{NOTE: Your Nations Baseball Registration Number will be emailed to this address}

TOURNAMENT or LEAGUE: \_\_\_\_\_ {please specify}

AGE LEVEL: \_\_\_\_\_ INSURANCE PERIOD SELECTED: FROM \_\_\_\_\_ TO \_\_\_\_\_

CLASSIFICATION: \_\_\_\_\_ CIRCLE ONE: ( Premier Elite Select Metro )

Complete and Send with Registration/Insurance Fee To:

Harry Oschip  
Nations Baseball Northeast Ohio  
Great Lakes Baseball League  
7575 Tyler Blvd. Suite C-18  
Mentor, Ohio 44060

hoschip@glbl.org

www.nations-baseball.com

www.glbl.org

www.nationsohio.com

### CLASSIFICATION OPTIONS:

**PREMIER:** Teams that are Academies, Club, Select, or Travel Teams with Players from multiple High School Districts. Teams that are well established and finish in the top half of their respective leagues. These Teams can be from the same community.

**ELITE:** Teams must be made up of players consisting of 75% of its players from one school district. These are Teams that cannot compete with the Premier Teams. Teams that fit this criteria may be re-classified to Premier or Select by your Area Director at any time.

**SELECT:** Teams must be made up of 100% of their players from one School District. This is for Community Teams only. No outside players are permitted. A roster of players, with addresses, phone numbers and High School District must be included or the team WILL NOT be allowed to participate in an Ohio Nations Tournament.

## NATIONS BASEBALL FEES 2010

\$140 Team Registration and Insurance from 8-1-09 thru 7-31-10

\$140 Team Registration and Insurance from 1-1-10 thru 12-31-10

\$125 Team Registration and Insurance from 1-1-10 thru 7-31-10 - Spring

\$100 Team Registration and Insurance from 8-1-10 thru 12-31-10 - Fall

\$ 50 Insurance for 1 Weekend Tournament Event – 3 Day Tournament Only.

\$ 45 Team Registration without Insurance \*

{\* You Must Provide and Upload a Copy of Your Insurance Policy at Your Team Page and Your Certificate must be validated and approved by Chappell Insurance, Nations Baseball Insurance Provider. Please List Nations Baseball, as Additional Insured.}

For All Insurance Inquiries:  
CHAPPELL INSURANCE AGENCY, INC.  
25807-A COX ROAD  
PETERSBURG, VA 23803

TELEPHONE: (804) 733-2020

(800) 447-6797

FAX: (804) 733-2968

EMAIL: [RICHARD@CHAPPELLINSURANCE.COM](mailto:RICHARD@CHAPPELLINSURANCE.COM)

[DEBBIE@CHAPPELLINSURANCE.COM](mailto:DEBBIE@CHAPPELLINSURANCE.COM)

[SUPPORT@CHAPPELLINSURANCE.COM](mailto:SUPPORT@CHAPPELLINSURANCE.COM)

