



**B.C. Babe Ruth / Cal Ripken**  
**Baseball**



**TOURNAMENT APPLICATION**

**1. LEAGUE INFORMATION:**

League Name: \_\_\_\_\_

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

Organization: \_\_\_\_\_

District #: \_\_\_\_\_

League President: \_\_\_\_\_

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

Ph: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

**2. WHICH TOURNAMENT? (Place an "X" By Selection, One Only)**

\_\_\_ 10 & Under \_\_\_ 11 Year Old \_\_\_ Cal Ripken 60' \_\_\_ Cal Ripken 70' \_\_\_ 13 Year Old

\_\_\_ 14 Year Old \_\_\_ 15 & Under \_\_\_ 16 Year Old \_\_\_ 18 & Under

If your League's application is not successful would it be interested in hosting another age division tournament?

\_\_\_ 10's \_\_\_ 11's \_\_\_ C/R 60' \_\_\_ C/R 70' \_\_\_ 13's \_\_\_ 14's \_\_\_ 15U \_\_\_ 16's \_\_\_ 18U (check one).

**3. Describe your League's experience hosting Babe Ruth Tournament Trail events. (i.e. District, Provincial or Regional, etc.)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Number of playing field(s), location, etc.?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Describe the local community as well as the activities available for visitors in the immediate area.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 6. Describe the proposed playing facilities i.e. lighting, seating, concession, rest rooms, handicapped accessibility, etc. Include a diagram or pictures of the proposed playing field(s) outlining distances to the outfield fences, home plate to the backstop and any/or unusual field conditions that may exist. Also enclose a duly signed written agreement from the controlling entity (city, school, district, or other baseball association, etc.) guaranteeing exclusive use of the playing field/stadium during the period of the Babe Ruth / Cal Ripken Provincial Tournament.

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- 7. The Provincial Tournament Agreement requires you to have medical attention on-site and available. How do you propose to meet these obligations?

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- 8. If you have any other comments with respect to your application that you feel the Site Selection Committee should consider, please indicate them below:

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Applicant has read and understands each of the provisions of the current Tournament Agreement and any additional Supplementary Memoranda and agrees to abide by the provisions in the event that any portion of said documents becomes part of the actual Tournament Agreement that will be included for this tournament.

\$300.00 Deposit Enclosed: \_\_\_\_\_ Yes \_\_\_\_\_ No

**League President:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DISTRICT & ASSISTANT PROVINCIAL COMMISSIONERS RECOMMENDATIONS**

I hereby recommend and support acceptance of this application to host 20\_\_\_\_\_ B.C. Babe Ruth Cal Ripken \_\_\_\_\_ Provincial Tournament.

\_\_\_\_\_  
District Commissioner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Provincial Commissioner Signature

\_\_\_\_\_  
Date