



**2019 Essex Express Baseball Father's Day Summer Classic
June 15 and 16, 2019 (one weekend only)**

Essex Baseball/Softball Fund, Inc. (in memory of Neil Rivers, Jr.) will be holding their 18th Annual Essex Express Father's Day Summer Classic tournament. Teams like to know who is registered. If you have an intent to play, please email me the registration form so I can post your team on the website. Fees can be sent closer to the due date.

Format: There will be an Open Division (for any team), a Rec A division and a B division. Three game guarantee. Two games for seating then single elimination on Sunday. Depending on the number of teams, there is the possibility of an age group having several divisions, such as U10-Division 1 and U10-Division 2, etc. **Rec teams should sign up for either A or B division.** Rec team is defined as a team consisting of players who play in an inhouse program and also plays in a travel league. (You will be contacted ahead of time to make sure you are placed in the right division for your team.) If there are not enough teams for a single age division, then the Tournament Director reserves the right to combine two age groups. There will be 1st and 2nd place team trophies and 15 individual trophies per team. Email questions to bat4essextournament@gmail.com. Check website for teams registered.

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Age Determination: May 1, 2019 determines age group. U8 (kid pitch), U9, U10, U11, U12.
90 ft diamond teams: U13, U14, U15, U16, U17, U18, U19

Entry fees: **includes baseballs and umpire fees: All teams from 7 yrs. to 12 yrs.: \$525.00 All other teams playing on a 90 diamond: \$625.00**

Make checks payable to: **Essex Baseball Fund** and mail to: **5004 Honeygo Center Drive, Suite 102, Box 305, Perry Hall, Md 21128.** Let us know if you wish to pay by credit card. All entry fees are due on June 10, 2019 but must be paid prior to their first game.

Due Date: All entries are due by **June 5, 2019.** As soon as possible, but no later than June 5, 2019, you **MUST EMAIL (or fax)** this registration form to us in order to reserve your spot.

Roster/COI: Prior to first game proof of insurance required for teams other than Baltimore County teams. **COI** should read: Baltimore County, Maryland, a body corporate and politic, 400 Washington Ave., Towson, Md 21204. Do not mail COI. Email it to address below. Teams and their opponents are decided randomly by the Tournament Director. If a team is in need of an accommodation, you must let us know by June 5, 2019. We will do our best to help with your accommodation request. All information will be available via email and the website. Rosters must be emailed to us **BEFORE** the 1st game. **Roster** should provide the players' name, uniform number and date of birth.

Contact Info: Email: bat4essextournament@gmail.com.
Website: www.essexdugout.com. Click on tournament page
Fax number is 410-687-7811

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Team name: _____ Spring League/age group entered in: _____

Age group: _____ A Division _____ B Division _____ Open Division: _____ Unsure: _____

Manager name: _____ Manager Phone #: (_____) _____

Manager email: _____ Does your team play inhouse/where: _____