

# **NMAA Pre Tournament Requirement**



*\*Coaches will not receive their packets/passess until this form is filled out and returned. Please submit to the NMAA office by fax (505-923-3114), e-mail ([dusty@nmact.org](mailto:dusty@nmact.org)), or hand delivery no later than 4pm on Tuesday May 10. This form takes the place of the mandatory coaches meeting.*

**NAME:**

**SCHOOL:**

1. I have read the coaches information document and understand all tournament regulations.

YES \_\_\_\_\_

NO \_\_\_\_\_

2. I have read and understand all NMAA Bylaws regarding the sport of baseball

YES \_\_\_\_\_

NO \_\_\_\_\_

3. Please list your cell phone number below so that you may be contacted should an NMAA Tournament Director need to speak with you (i.e. inclement weather, schedule change, etc.)

4. FOR OUT OF TOWN TEAMS ONLY:

Please list the name of the hotel you are staying at while here for the tournament. Be specific (i.e. Best Western – ABQ Airport, Days Inn – Rio Rancho, etc.)

List the number of rooms your team will be utilizing each night during your stay.

5. Number of Coaches on Staff for the State Tournament: \_\_\_\_\_

6. SIGNED

\_\_\_\_\_  
Coach (sign or type name here)

\_\_\_\_\_  
Date (write or type)

**\*\*\*FAX TO NMAA AT 505-923-3114 or E-MAIL TO [dusty@nmact.org](mailto:dusty@nmact.org)\*\*\***