

2026

Tournament of Champions

Baseball Tournament

Registration Form

Sunday, June 14th, 6:30– 7:30



League: _____

Team Name: _____

_____ **10u Division** _____ **12u Division**
Tournament Dates- Friday June 19th - June 21st

Manager: _____

Tel: _____ E-Mail: _____

Coach: _____

Tel: _____ E-Mail: _____

Roster Turned In

\$200.00 Entrance Fee () Check Number: _____

Any **TOC** team wishing to enter this Tournament **must register on or before June 14th** Please submit this form, a team roster and a check for the **\$200.00** entrance fee, must be paid by **June 14th**. Checks made payable to "**District 8 Little League**". **Registration date Sunday June 14th at NS Community Center 600 S. Bay Rd, 6:30-7:30** Any teams wishing to enter this tournament, after the registration deadline will be placed on a waiting list.

Mail this form and check to: District 8 LL 201 Norwood Ave. Syracuse NY 13206

For more info : **Mike Kasch Email: mlkasch@twcny.rr.com Cell 315-439-7793**
Kathy Bennett Email: kbennett@bsk.com, Cell 315-436-9455

Dan Cavallo :Cell 315-247-0978, Email Litleag@aol.com Fax 315-802-6239