



2017 TREASURE COAST SPRING INVITATIONAL

Vero Beach, Florida

Please make sure you complete this registration form and mail it with your \$250.00 team registration fee as soon as possible. Reservations will be accepted on a first come-first served basis.

Team Information

School Name _____

School Address _____

City _____ State _____ Zip _____

Head Coach's Name _____

Office Phone _____ Home Phone _____ Cell _____

Email _____ Fax _____

Lodging Information

Arrival Date _____ Day _____ Time _____

Departure Date _____ Day _____ Time _____

Accommodations Requested: First Choice _____
Second Choice _____

(due to limited room blocks we can not guarantee that you will be at hotel requested)

Historic Dodgertown Villas

Total # of Double Rooms (sleep 1-2) _____
Total # of Queen Doubles (sleep 1-4) _____
Total # of King Suites (sleep 1-4) _____
Total # of Double Suites (sleep 1-4) _____

Partner Hotels

Total # of Double Rooms _____
Total # of Single Rooms _____
Total # of Suites _____

Practice & Game Request

Day Game Fee \$105.00
Night Game Fee \$150.00
Day Practice Fee (90 minutes, full field) \$ 50.00
Night Practice Fee (90 minutes, full field) \$125.00

*Game fee includes field and umpires and game balls.

Number of Day Games Requested _____ Number of Night Games Requested _____

Number of Practice Sessions Requested _____

- Application must be accompanied by a \$250.00 team registration fee (\$350.00 if paid after November 1)
Cancellation Policy - Teams that submit a registration fee, but are unable to attend, will forfeit the registration fee.

By signing this agreement, I hereby agree to all terms and conditions herein described.

Coaches Signature _____ Date _____

Print or Type Name _____

* Check or money order (Made Payable to Verotown LLC)

* Credit Card AMEX Visa Mastercard Discover

CC# _____ Exp. Date _____ Security Code _____ Amount _____

Card Holder _____ Signature _____