



850 Ridge Avenue  
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Fax: (412) 321-4088

## 2024 NCSA Swing Into Spring – Panama City Beach

The Institution participating in this event must use this form. This agreement subscribed to by the Team Advisor \_\_\_\_\_ and Team President \_\_\_\_\_ of \_\_\_\_\_ gives above said College/University Club Softball Team the right to participate in the 2024 NCSA Swing Into Spring – Panama City Beach. Receipt of this fully executed registration form AND the receipt of both the registration fee and performance bond will secure your place in the 2024 Swing into Spring – PCB event for the selected week. There is no need to declare the number of games or practices requested until schedule request form is due on 1/1/24.

Registration Fee Before November 1<sup>st</sup>: \$100.00  
Registration Fee After November 1<sup>st</sup>: \$200.00

Game Fee: \$115.00 per-game (trainer included)  
Practice: \$30.00 per-hour

|                       | Select One |
|-----------------------|------------|
| Week 1: Feb 25-Mar 2  |            |
| Week 2: Mar 3-Mar 9   |            |
| Week 3: Mar 10-Mar 16 |            |
| Week 4: Mar 17-Mar 23 |            |
| Week 5: Mar 24-30     |            |

**Performance Bond: \$200.00 Refundable at the end of the event if guidelines are met and post event survey is received**

**Mandatory accommodation booking through NCSA approved hotel/resort booking partners. Lodging opt out fee of \$400 per team not booking through NCSA hotel/resort partners prior to the lodging cutoff date of Feb 1.**

**We have read the tournament guidelines: Yes ( ) No ( )**

This agreement shall be null and void if the team uses or proposes to use in an NCSA Sanctioned Swing Into Spring Game, any player who is ineligible in accordance with the NCSA rules and regulations. You further agree you have read and agree to the event guidelines. This agreement acts as your initial invoice. All applicable discounts will be applied to final invoice. Teams not submitting full payment by 1/31/2024 will be subject to penalties as described in the event guidelines.

\_\_\_\_\_  
Team Advisor - PRINT

\_\_\_\_\_  
President - PRINT

\_\_\_\_\_  
Team Advisor-SIGNATURE

\_\_\_\_\_  
President - SIGNATURE

\_\_\_\_\_  
Advisor Phone Number

\_\_\_\_\_  
President Phone Number

\_\_\_\_\_  
Advisor Email Address

\_\_\_\_\_  
President Email Address

Please make all checks payable to:  
**NCSA**

EIN: 52-2270910

Mail to: NCSA  
850 Ridge Ave  
Suite 301  
Pittsburgh, PA 15212



**Registration Fee & Performance Bond due with Signed Agreement**

Invoice available upon request: Lacie.Lautner@CollClubSports.com