

AMERICAN AMATUER BASEBALL CONGRESS OF GEORGIA

AABC OF GEORGIA FORM FOR PROOF OF INSURANCE AND FIGHT LETTER
INSURANCE LETTER

TO WHOM IT MAY CONCERN:

This is to affirm that all sponsored by:

The: _____
Association/League

are covered by accident insurance from: _____. CLAIM FORMS ARE ATTACHED.

Date

Signature

Typed/Printed Name

Title

FIGHT LETTER

This will acknowledge the rule of AABC of Georgia that if any **MANAGER, COACH, FAN, OR ANY PERSON ASSOCIATIONED/AFFILIATED** with the _____ is involved in any **PHYSICAL CONTROVERSY OR ALTERCATION** at a **AABC OF GEORGIA** Tournament site, then a cash penalty of one hundred dollars (\$100.00) will be imposed upon _____ and said penalty will be paid immediately upon imposition; no later than the beginning if the next round of the tournament.

It is understood and agreed that failure to pay the penalty will result in the forfeiture of games until paid.

Date

Signature

Typed/Printed Name

Title

HAVE ASSOCIATION/LEAGUE OFFICIAL COMPLETE & SIGN, AND TURN IN TO TOURNAMENT DIRECTOR

******* SIGNATURES BELOW INDICATE AN UNDERSTANDING, WILLINGNESS AND AGREEMENT TO ABIDE BY SECTION VIII, PAGE 14, PARAGRAPH 3 AND PARAGRAPH 4 IN THEIR ENTIRETY.**

SIGNATURE OF COACH/MANAGER

SIGNATURE OF ASSOCIATION/LEAGUE PRESIDENT