



850 Ridge Avenue  
 Suite 301  
 Pittsburgh, PA 15212  
 Office: (412) 321-8440  
 EIN: 52-2270910

## 2026 NCBA Swing Into Spring Showcase - Henderson

The Institution participating in this tournament must use this form. Games that are not contracted on an official tournament contract shall be considered invalid. This contract subscribed to by \_\_\_\_\_ (Team Advisor) and \_\_\_\_\_ (Team President) of \_\_\_\_\_ (School) gives above said College/University Club Baseball Team the right to participate in the 2026 NCBA Swing Into Spring Showcase.

**Registration Fee Before November 30<sup>th</sup>:**      \$125.00 (NCBA Members)      \$250.00 (Non-NCBA Members)

**Registration Fee After November 30<sup>th</sup>:**      \$200.00 (NCBA Members)      \$325.00 (Non-NCBA Members)

**Performance Bond:** \$200.00 Refundable at the end of the tournament if guidelines are met and surveys received

**Game Fee:** \$165.00 per-game                      Practice: \$50.00 per-hour

**Mandatory hotel booking through NCBA partnered hotels – details to be announced soon.**  
**Hotel opt out fee of \$400 per team for booking outside NCBA partners.**

	Quantity	Price Per	Cost
<b>Team Registration</b>	1	\$ 125.00	\$ 125.00
<b>Performance Bond</b>	1	\$ 200.00	\$ 200.00
<b>Games</b>		\$ 165.00	\$
<b>Practice Hours</b>		\$ 50.00	
<b>Total Cost Due (1/31/2026)</b>			\$

**\*\$200 if paid after 11/30**

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

This contract shall be null and void if the team uses or proposes to use in an NCBA Sanctioned Spring Training Game, any player who is ineligible in accordance with the NCBA rules and regulations. You further agree you have read and agree to the tournament guidelines. This contract acts as your initial invoice. All applicable discounts will be applied to final invoice. Teams not submitting full payment by 1/31/2026 will be subject to penalties as described in the tournament guidelines.

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

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

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

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

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

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

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

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

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

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

**\$325.00 to cover Registration Fee & Performance Bond due with contract (IF paid by 11/30)**