

2026 MBT STATE QUALIFIER BID APPLICATION FORM



(Please use one application form for multiple Qualifiers)

Tournament Name				Association				
Te	ournament (Contact		Cell Phone				
Field(s) Name			Location					
Eı	ntry Fee \$ _	Nu	mber of Guara	aber of Guaranteed Games Alt. Ph #				
Gate Fee: Yes No Flat Team Gate Fee: Yes No (if Yes to either) Amount \$								
Mailing Address:								
C	ity/State/Zip):						
Email Address:			Alt. Email:					
Sı	pecial notes:							
		•		me contact MBT at MBT Qualifier 12AAA 12AA 12AA		at apply) (AAA=A 14AAA 14AA 14A+	, AA=B, A=C) 15AAA/AA 15A	
	Tournamer	nt Dates: (Ci	rcle all that ap	oply) (Please st	ecify which age	e/division for wh	ich weekend)	
	May	1-3 N	May 8-10	May 15-17	May 22-24 &	25 May 29	-31	
June 5-7 June 12-14 June 19-21 June 26-28 (only 9A, 9AA, 9AAA, 10AA, 11AA, 12AA, 13AA, 11A 14A+, & 15AA/AAA)								
I hereb change immed dimens on that	s, it is the aboriately of those ions will be for fact will be se	ne information we mentioned to changes. I will be be be to all teams	ournament direct enter the inform test of our abilitiat the time of reg	s accurate and per tors responsibility nation on the MB7 es. If these rules of	mission is granted to notify MBT an website and keep r proper field dim if possible. Every	d those teams that it maintained. MI	BT Rules and field be followed, a note	
Directors Signature					Date			