

SPRING ANNUAL SOFTBALL

TOURNAMENT FUNDRAISER

SATURDAY NOVEMBER 14, 2026

CHECK IN BEGINS AT 7:45 am

1st GAMES BEGIN AT 8:00 am

DAWSON FIELDS – TEMPE SPORTS COMPLEX

8403 SOUTH HARDY DRIVE, TEMPE, AZ



Round Robin + Single Elimination

Amateur Softball Association (ASA) slow pitch rules

Professionals - \$100 per player | Students - \$20 per player with student ID

10+ players per team - Minimum of 2 women playing -

All players employed in the A/E/C Industry

LUNCH IS INCLUDED

REGISTRATION AND PAYMENT DUE **October 23rd, 2026**

SPONSORSHIP OPPORTUNITIES AVAILABLE



2026 SPONSORSHIP LEVELS

Hydration Sponsor (Limit 2) \$250
Fuel the tournament and place your company logo front and center on a 5-gallon cooler of Gatorade

Food Sponsor (Limit 2) \$500
Company name on game-day sponsor poster and displayed directly at the lunch station

Team Sponsor..... \$750
Registration for up to 10 players (must submit completed registration form)

Game Day Sponsors \$1,000
Company logo printed on game-day sponsor poster
Registration for up to 12 players (must submit completed registration form)

Field Sponsors (Limit 4)..... \$2,000
Your company name is the official title of one tournament field.
Featured Company Logo placement on the Game Day Schedule, on-field signage, and our master Sponsor Poster.
Registration for up to 16 players (must submit completed registration form)

Sponsorship fees must be paid by check or online. Please make check(s) payable to: “**Engineers Without Borders**” with “**Phoenix Professional Chapter**” in the memo line. Mail registrations fees using the form attached to this flyer. For on-line payment using MasterCard or Visa credit card, use or [Phoenix EWB 2026 Fall Softball Tournament](#)

After clicking type and number of tickets or sponsorship on the right hand of screen, below “Your Order”, click on the \$ amount, which will take you to checkout.



2026 SPONSORSHIP FORM

SPONSOR INFORMATION

COMPANY NAME: _____

COMPANY ADDRESS: _____
STREET CITY, STATE ZIP CODE

SPONSORSHIP LEVEL: _____

CONTACT’S NAME: _____

CONTACT’S PHONE NUMBER: _____

CONTACT’S E-MAIL ADDRESS: _____

ENGINEERS WITHOUT BORDERS - USA

Phoenix Professional Chapter

WE SINCERELY THANK YOU

FOR YOUR LOYAL SUPPORT

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After clicking type and number of tickets or sponsorship on the right hand of screen, below “Your Order”, click on the \$ amount, which will take you to checkout.



Registration and payment must be received by October 23rd, 2026.

Sponsors shall submit one color logo to the Softball Fundraiser Chairperson via e-mail. Contact information listed in footer.

2026 REGISTRATION FORM

TEAM CAPTAIN INFORMATION

NAME: _____

PHONE NUMBER: _____

CELL PHONE NUMBER: _____

E-MAIL ADDRESS: _____

TEAM NAME: _____

NUMBER OF PLAYERS: _____ (Fill out **2026 Team Roster** with players' names)

TOTAL AMOUNT ENCLOSED: _____

***Minimum of two women players required to play at all times.
Plan your team roster accordingly.***

Team Captain will be the only person who is contacted by EWB-USA Phoenix with softball tournament fundraiser information. It is the responsibility of the Team Captain to disseminate information to the remaining team members. Please see previous pages for payment information.

All registrants must be 18 years or older and sign the attached **2026 Liability Waiver & Photo/ Video Release Form**.

2026 TEAM ROSTER



TEAM NAME: _____

NAME: PLAYER 1

GENDER: Male OR Female

NAME: PLAYER 2

GENDER: Male OR Female

NAME: PLAYER 3

GENDER: Male OR Female

NAME: PLAYER 4

GENDER: Male OR Female

NAME: PLAYER 5

GENDER: Male OR Female

NAME: PLAYER 6

GENDER: Male OR Female

NAME: PLAYER 7

GENDER: Male OR Female

NAME: PLAYER 8

GENDER: Male OR Female

NAME: PLAYER 9

GENDER: Male OR Female

NAME: PLAYER 10

GENDER: Male OR Female

NAME: PLAYER 11

GENDER: Male OR Female

NAME: PLAYER 12

GENDER: Male OR Female

NAME: PLAYER 13

GENDER: Male OR Female

NAME: PLAYER 14

GENDER: Male OR Female

NAME: PLAYER 15

GENDER: Male OR Female

NAME: PLAYER 16

GENDER: Male OR Female

2026 Liability Waiver and Photo/Video Release Form

ALL APPLICATIONS MUST BE SIGNED TO ENTER THIS EVENT. NO TRANSFERS.

I understand that participation in the 2024 Softball Tournament Fundraiser (Tournament) organized by Engineers Without Borders-USA Phoenix Professional Chapter (EWB-USA Phoenix) involves running/strenuous activity and that there is risk of damage, illness or death due to the nature of the event. I understand that such risks include, without limitation, slips, falls, risks caused by physical activity, thirst, abnormal responses of the cardiorespiratory system including heart arrhythmia, heart attack, stroke, and sudden death; heat, sun, or cold related injuries; fatigue, dizziness, imbalance, or other conditions that may increase the risk of accident or injury; mistake or negligence by myself/my child or other participants; collisions with spectators, other participants or other natural or man-made objects; travel to or from the event; any other event-related activity; and any other accident, risk or danger.

I recognize that I am fully responsible for knowledge of my own/my child's state of health and for determining whether participation in any activity related to this Event is medically appropriate for me/my child. I further state that I/my child is in proper physical condition to participate in this event.

In consideration of receiving permission for me/my child to participate in the Tournament, I fully assume all risks of damage, illness, injury or death I may suffer as a result of participation in the Tournament including to the fullest extent permitted by law claims arising as a result of the negligence of any of the Releasees identified below. I hereby voluntarily waive any rights, claims, and causes of action I have or may have against the following Releasees and their agents, representatives, officers, directors, affiliates, successors and assigns: EWB-USA Phoenix; the City of Tempe, their respective volunteers, sponsors, members and employees; and anyone associated with this event. I understand my right to bargain for different waiver of liability terms and waive that right.

I understand Releasees cannot be expected to control the risks associated with the event. In case of an emergency, I authorize EWB-USA Phoenix or its authorized designees to take whatever action at their discretion is deemed necessary without my consent for medical treatment of me, and at my cost, but I understand that Releasees undertake no duty and shall not be obligated to take any such actions. I hereby waive, release, covenant not to sue, and forever discharge Releasees from and against any and all losses arising from, resulting from, or relating to deciding to seek, seeking or receiving medical care, or not to seek or receive medical care, or in traveling to and from a medical facility.

I further agree to indemnify and hold each of the Releasees harmless from and against any and all such liabilities, claims, actions, damages, costs and expenses including by way of example, but not limited to, all attorneys' fees, costs of court, and the costs and expenses of other professionals and disbursements up through and including any appeal.

I intend the foregoing release to be binding on me personally, as well as upon my heirs, executors, administrators, personal representatives, successors and interested persons who might make a claim on my behalf.

To the extent required by applicable law, this waiver does not apply to any particular Releasees to the extent any such losses are caused by the intentional or grossly negligent conduct of such Releasee.

I understand that during the Tournament and sign-in / registration activity I may be photographed or videotaped. I hereby agree to allow my photograph, video, or film likeness to be used for purposes of publicizing future events and for any other legitimate and lawful purpose by the Releasees. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears.

THE UNDERSIGNED HAS CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTANDS ITS CONTENTS. BY SIGNING THIS AGREEMENT, UNDERSIGNED REPRESENTS THAT HE/SHE IS AWARE THAT THIS IS A RELEASE OF LIABILITY, A PROMISE NOT TO SUE, AND A CONTRACT BETWEEN THE UNDERSIGNED AND THE RELEASEES.

SIGNATURES MUST BE COMPLETED ON THE FOLLOWING PAGE.

2026 Liability Waiver and Photo/Video Release Form - Continued

TEAM NAME: _____

I have read and understand the liability waiver and photo/video release.

Player 1

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 2

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 3

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 4

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 5

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 6

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 7

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 8

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 9

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 10

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 11

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 12

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 13

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 14

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 15

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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Player 16

REGISTRANT'S PRINTED NAME	REGISTRANT'S SIGNATURE	DATE (mm/dd/yyyy)
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