

Coed and Men's Slow Pitch Softball Spring League Information



Team Registration Accepted:
Jan. 29 - Feb. 16, 2018

Please register at the Novato Gymnastics Center
950 7th Street

Team Fee: \$700 per team, plus \$5 for each non-resident.

League Format: The spring season is limited to the first 16 coed teams and the first 16 men's teams to register.

Division	Number of Teams	Game Night	Site
Men's C-I	8	Tuesdays, and some Wednesdays	IVC Fields
Men's C-II	8	Mondays, and some Wednesdays	IVC Fields
Men's C-III	8	Wednesdays and some Mondays	IVC Fields
Coed C-I	8	Fridays, and some Wednesdays	IVC Fields
Coed C-II	8	Thursdays, and some Wednesdays	IVC Fields
Coed C-III	8	Wednesdays and some Thursdays	IVC Fields

Game nights and the number of teams per division may change due to registration.

League play will begin in late March and conclude in early/mid June. Each team will play approximately ten games.

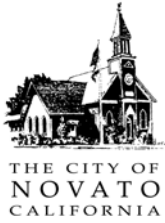
Roster: Rosters must be complete and include the name, signature, street address and phone number for each player. Incomplete rosters will not be accepted. Softball rosters must have a minimum of ten and a maximum of 20 players. Players must be at least 16 years old. Players under 18 years old must have a parent/guardian sign the roster.



Registration: Team registration will be accepted January 29 - February 16, 2018 at the Novato Gymnastics Center, 950 7th Street, first come, first serve. A completed roster and league fee, made payable to the **City of Novato** is required to register. Rosters must be complete and include the name, signature, street address and phone number for each player. Incomplete rosters will not be accepted.

Manager's Meeting; Tuesday, March 6 at the Hamilton Community Center-Preschool Room, 503 South Palm Drive: 6pm Coed Manager's and 7pm Men's Manager's.

Summer Registration Dates: April 23 - May 11, 2018
Fall Registration Dates: July 9 - 27, 2018



2018 Adult Athletics League Calendar

Sport-Season	Level	Reg Dates	Game Nights	League Starts	Team Fee*
Men's Basketball-Summer	A/B/C/D	Mar 12-30	Sun/Tu/Th	Mid May	\$625
Men's Basketball-Fall	A/B/C/D	Jul 16-Aug 3	Sun/Tu/Wed/Th	Sept 9	\$625
Men's Basketball-Winter '19	A/B/C/D	Oct 29-Nov 16	Sun/Tu/Th	Jan 6, 2019	\$625
Women's Basketball-Spring	B/C	Jan 16-Feb 2	Wed	March 7	\$415
Women's Basketball-Summer	B/C	Mar 19-Apr 13	Wed	May 16	\$415
Women's Basketball-Fall	B/C	Jun 25-Jul 13	Wed	Aug 8	\$415
Coed Softball-Spring	C-I, C-II, C-III, C-IV	Jan 29-Feb 16	Th/Fri/Wed	Late March	\$700
Coed Softball-Summer	C-I, C-II, C-III, C-IV	Apr 23-May 11	Th/Fri/Wed	June	\$700
Coed Softball-Fall	C-I, C-II, C-III, C-IV	July 9-27	Th/Fri/Wed	Sept	\$550
Men's Softball-Spring	C-I, C-II, C-III, C-IV	Jan 29-Feb 16	Mon/Tu/Wed	Late March	\$700
Men's Softball-Summer	C-I, C-II, C-III, C-IV	Apr 23-May 11	Mon/Tu/Wed	June	\$700
Men's Softball-Fall	C-I, C-II, C-III, C-IV	July 9-27	Mon/Tu/Wed	Sept	\$550
Coed Volleyball-Spring	B, C	Feb 26-Mar 16	Sun	Apr 22	\$750
Coed Volleyball-Fall	B, C	Jul 16-Aug 3	Sun	Aug 19	\$750
Coed Volleyball-Winter '19	B, C	Oct 22-Nov 9	Sun	Jan 6, 2019	\$750
Reverse Coed Volleyball-Spring	A/B	Jan 16-Feb 2	Wed	Mar 7	\$540
Reverse Coed Volleyball-Summer	A/B	Mar 19-Apr 13	Wed	May 16	\$540
Reverse Coed Volleyball-Fall	A/B	June 25-Jul 13	Wed	Aug 8	\$540
Men's Volleyball-Spring	A/B	Jan 16-Feb 2	Thurs	Mar 8	\$540
Men's Volleyball-Summer	A/B	Mar 19-Apr 13	Thurs	May 17	\$540
Men's Volleyball-Fall	A/B	June 25-Jul 13	Thurs	Aug 9	\$540
Women's Volleyball-Spring	A/B	Jan 16-Feb 2	Thurs	Mar 8	\$540
Women's Volleyball-Summer	A/B	Mar 19-Apr 13	Thurs	May 17	\$540
Women's Volleyball-Fall	A/B	June 25-Jul 13	Thurs	Aug 9	\$540

* Plus \$5 for each non-resident.

Dates are subject to change, please visit www.novato.org/sports for current information.



CITY OF NOVATO PARKS, RECREATION AND COMMUNITY SERVICES DEPARTMENT

922 Machin Avenue - Novato, CA 94945

Register at the Novato Gymnastics Center, 950 7th Street - Novato, CA 94945

(415) 899-8279 - Novato Gymnastics Center Fax: (415) 897-6395

www.novato.org/sports

ADULT SPORTS TEAM ROSTER

Sport (Check one):	Basketball __ Men's __ Women's	Softball __ Coed __ Men's	Volleyball __ Coed __ Rev Coed __ Men's __ Women's
Season (check one):	__ Fall __ Winter __ Spring __ Summer	__ Spring __ Summer __ Fall	__ Fall __ Winter __ Spring __ Summer
Division of Play (circle one):	A B C D	C-I C-II C-III	A/B B-1 B-2 C-1 C-2

PLEASE PRINT:

Team Name: _____ Team Name Last Season: _____

Manager's Name: _____ Team phone to post with schedule online: (____) _____

Manager's Address: _____ City: _____ Zip: _____

E-Mail Address: _____

Phone: Home (____) _____ Work: (____) _____ Cell: (____) _____

ADULT SPORTS CODE OF CONDUCT

- A. The manager/captain of each team shall be responsible for seeing that each member of his/her team is familiar with the following rules of conduct and will also be expected to see that all members of the team abide by this code during the season. **ALL PARTICIPANTS ARE REQUIRED TO ABIDE BY THESE RULES OF CONDUCT.**
1. No player shall refuse to abide by an official's decision, threaten an official, use profanity, or at any time lay a hand upon, push, shove or strike an official.
Penalty: The official shall eject the player from the game and report the incident to the league office. The player shall be automatically suspended until a final disposition by the league office.
 2. No player shall demonstrate objection to an official's decision by throwing any object that an official judges to be dangerous.
Penalty: Same as Rule #1.
 3. No player shall use unnecessary rough tactics against the body and person of another player with the intention of causing injury; nor shall any player threaten, strike or push any other player, spectator or scorer.
Penalty: Same as Rule #1.
 4. No player or team member may be intoxicated immediately prior to or during a game. No intoxicating substances shall be allowed on the playing field/court.
Penalty: All intoxicated players must be ejected and are subject to the conditions of Rule #1 if the offense is flagrant. Intoxicating substances must be removed from the site upon official warning and failure to obey this warning will result in an immediate forfeit.
 5. Smoking is prohibited at all times by players and spectators in all parks.
Penalty: Officials are required to warn players guilty of infractions of this rule; failure of such players to comply will result in immediate ejection.
 6. The league office shall have the power and full discretion of imposing penalties on all violations of the players' code of conduct. For any violations not included in the said code, the penalty shall be at the discretion of the league office.
 7. If a player is ejected from a game, he or she is required to vacate the game site immediately.

Liability Waiver/Medical Treatment Consent

I realize that participation in this sport includes the possibility of injury to myself, fellow participants and nonparticipants. I have the basic understanding and skills to participate in this sport.

In consideration for my and/or any of my family members' participation in the City of Novato's recreation program(s) that I wish to register for, I voluntarily RELEASE the CITY OF NOVATO, CITY OF NOVATO SUCCESSOR AGENCY TO THE DISSOLVED NOVATO REDEVELOPMENT AGENCY, CITY OF NOVATO PUBLIC FINANCE AUTHORITY AND THEIR RESPECTIVE OFFICIALS, OFFICERS, AGENTS, EMPLOYEES AND VOLUNTEERS (hereinafter referred to as "RELEASEES") from any and all liability for injuries or death or property damage to me and/or my family members resulting from, arising out of, or in any way connected with my and/or any of my family members' participation in the City of Novato's recreation program(s) or use of the RELEASEES' facilities in connection with this/these program(s). I understand that this WAIVER and RELEASE is applicable even though the negligent activities of the RELEASEES may have contributed to the injury or death or property damage suffered by me or any of my family members participating in this/these program(s). I further agree to DEFEND, INDEMNIFY and HOLD HARMLESS the RELEASEES from and against any and all liability, claims, causes of action, and/or losses of any nature or kind (including litigation-related expenses such as attorney and expert witness fees) resulting from, or in connection with, participation in this/these program(s) whether caused by any negligent act or omission of the RELEASEES.

I further understand that serious accidents may occur in the City of Novato recreation program(s) that I am registering for, that participants in this/these program(s) may sustain mortal or serious personal injuries, and/or property damage, as a consequence of their participation in this/these program(s). Knowing the risks of said event, nevertheless, I HEREBY AGREE TO ASSUME THOSE RISKS AND TO RELEASE AND HOLD HARMLESS TO THE FULLEST EXTENT ALLOWED BY LAW ALL OF THOSE PERSONS MENTIONED ABOVE WHO THROUGH PASSIVE OR ACTIVE NEGLIGENCE OR CARELESSNESS MIGHT OTHERWISE BE LIABLE TO ME FOR DAMAGES.

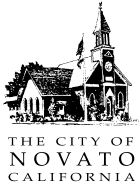
It is further understood and agreed that this waiver, release, hold harmless and indemnification agreement is to be binding on me, any of my participating family members, and all of our heirs, representatives, and assigns.

I hereby authorize qualified physicians to render medical treatment or care that they may deem necessary for me or my family members in case of illness or accident during such program(s).

By my signature below, I signify that I have read, understand, and voluntarily agree to be bound by each of the terms stated above.

	Player's Name (Type or Print Legibly)	Players' Signature	Street Address, City, Zip	Home Phone	Date
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Fee: _____	NR: _____	Total: _____	By/Date: _____
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Adult Athletics Team Payment Sheet

Please **ONLY** use this form if you are paying by credit card.

Please complete all items below (this form will not be kept with your roster).

Team Name: _____ Sport: _____ Season: _____

Name: _____ Phone: (_____) _____

E-Mail: _____

Master Card



VISA



AMERICAN EXPRESS



DISCOVER



Card No.: ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ Expiration Date: ____ - ____ / ____ - ____

PRINT NAME as it appears on card: _____ Card Security Code: _____

Signature: _____ Date: _____

Please return this form, along with your roster to the Novato Gymnastics Center, 950 7th Street, Novato
(415) 899-8279 - Novato Gymnastics Center Fax: (415) 897-6395