



Woodland Parks & Recreation Department

Adult Softball

2001 East Street • Woodland, CA, 95776 • Phone (530) 661-2000
 www.cityofwoodland.org/parks&rec

ADULT SOFTBALL ROSTER SPRING 2012

Registration must be received by 5 p.m., Wednesday, February 15, 2012 or a \$50 LATE fee will be assessed.

Team Information

- Home
 Cell

Team Name _____ **Manager's Name** _____ **Manager's Phone** _____

We reserve the right to deny inappropriate team names

League & Night Information

Registration is limited and taken with payment on a first come, first served basis

Division Preference

Lower number = Higher caliber of play

Some levels may not be available for the desired night of play.

- | | | |
|--|---|---|
| <input type="checkbox"/> Co-ed MONDAY | <input type="checkbox"/> D2 | <input type="checkbox"/> D4 |
| <input type="checkbox"/> Co-ed FRIDAY | <input type="checkbox"/> D2 | <input type="checkbox"/> D3 <input type="checkbox"/> D4 |
| <input type="checkbox"/> Men's WEDNESDAY | <input type="checkbox"/> D1 <input type="checkbox"/> D2 | <input type="checkbox"/> D3 <input type="checkbox"/> D4 |
| <input type="checkbox"/> Men's THURSDAY | <input type="checkbox"/> D1 <input type="checkbox"/> D2 | <input type="checkbox"/> D3 <input type="checkbox"/> D4 |
| <input type="checkbox"/> Men's FRIDAY | <input type="checkbox"/> D1 <input type="checkbox"/> D2 | <input type="checkbox"/> D3 <input type="checkbox"/> D4 |

Has this team participated in this league before? Yes No Most recent season played _____

Team Name during this season _____ Division _____ Manager's name _____

Manager Information

Street Address _____ **City** _____ **Zip Code** _____

Home

Cell ()

@

Phone 2 _____

Email Address _____

Registration Fees

1. League Entry Fee	Co-ed			Men's			Sub Total
	<input type="checkbox"/> Early By 1/18/12	<input type="checkbox"/> General By 2/15/12	<input type="checkbox"/> Late After 2/15/12	<input type="checkbox"/> Early By 1/18/12	<input type="checkbox"/> General By 2/15/12	<input type="checkbox"/> Late After 2/15/12	
	\$316	\$336	\$386	\$348	\$368	\$418	\$
2. Non Resident Fees	<input type="checkbox"/> \$15 per each Non Resident x _____.			<input type="checkbox"/> \$50 for Unlimited amount of Non Residents			\$
3. 2012 ASA Fees	<input type="checkbox"/> \$25 for Spring 2012 Season			<input type="checkbox"/> This fee has been paid at _____ (agency) for the _____ (season) for _____ (team). <i>Team must have 51% of same players. Switching Coed & Men's does not count.</i>			\$
TOTAL FEES DUE							\$

Other League Details

- **8 GAME FORMAT**
- Rosters due at time of registration, otherwise "roster-less" teams will be subject to in highest level of play.
- Residents MUST have a physical Woodland address, not a P.O. Box. All players not residing within Woodland city limits are considered a Non-resident. Each Non-resident must pay \$15 each, or \$50 for unlimited Non-residents on a team.
- For each player added to the roster after 2/24/12, add \$5, \$20 for non-residents.
- Be sure that all information on this roster is current. Teams playing with illegal players and incomplete rosters are subject to forfeiture.
- **ALL PLAYERS MUST SIGN THE WAIVER ON THE REVERSE SIDE**

Woodland Parks & Recreation ADULT SOFTBALL TEAM ROSTER (**Limit 22 per team****)**

Team Name

Manager's Name

Manager's Phone

ALL PLAYERS MUST REGISTER FOR ABOVE TEAM IN THE AREA PROVIDED BELOW. ONLY COMPLETE ROSTERS WILL BE ACCEPTED. THIS ROSTER IS GOOD ONLY FOR ABOVE SEASON. All players must be prepared to show identification at any time by a City of Woodland Staff member.

ADULT SPORTS: Participants will be running, jumping, throwing, batting, catching and bending at the waist. Possible injuries include, but are not limited to, sprained ankles, knee injuries, back strain, bruises, abrasions and broken bones.

AGREEMENT, WAIVER AND GENERAL RELEASE

In consideration for being permitted by the above department to participate in the above activity, I hereby waive, release and discharge any and all claims for damages which I may have or which may hereafter accrue as a result of participation in said activity. This release is intended to discharge in advance the above department (its officers, employees or agents) from and against any and all liability arising out of negligence or carelessness on the part of said department (or its officers, employees or agents). I understand that the above activity may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; that serious accidents occasionally occur during the above activity; and that participants in the activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume any and all risks of injury or death and to release and hold harmless the above department (its officers, employees and agents) who through negligence, carelessness or any other act or omission might otherwise be liable to me. I further understand and agree that this waiver, release and assumption of risks is to be binding on my heirs and assigns. I further agree to indemnify and to hold the above department (its officers, employees and agents) free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage that I may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DEPARTMENT, AND I SIGN IT OF MY OWN FREE WILL.

Player's Name (LEGIBLY PRINT)	Age	Physical Address	Zip Code	Phone	Signature	Date
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						

EACH PARTICIPANT MUST PERSONALLY SIGN THE ROSTER – ALL ADDS WILL BE ATTACHED TO THIS FORM