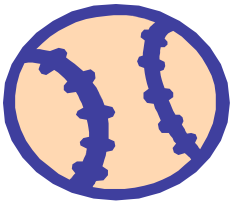


Adult Softball 2012

ROYAL OAK RECREATION
(248) 246-3180

Royal Oak Recreation will begin accepting adult softball team registrations on Monday, February 6th for all returning teams. **Open registration begins Monday, February 27th**. We will continue taking registrations until leagues sell out.

League Offerings:

Coed

Monday	Division III	8 Teams
Tuesday	Division I	8 Teams
Wednesday	Division III	8 Teams
Thursday	Division II	8 Teams

Mens

Tuesday	Division II	8 Teams
Wednesday	Division III	8 Teams
Thursday	Division I	8 Teams

Entry Fee:

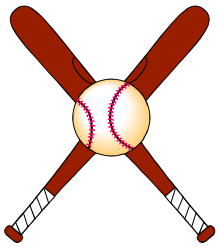
$575 (*Includes: 12-game season, playoff tournament for top 4 teams (single elimination), A.S.A. Registration, softballs, and awards.)*

Umpire Fees: **$13** per team per game (*pay at the site*)

Fields/Times:

Worden #2	6:10, 7:20
Worden #5	6:10, 7:20, 8:30
Kenwood #2	6:10, 7:20
Red Run E	6:10, 7:20

Rosters: Teams can have up to 20 players with ***no restrictions on non-residents***. ***Player rosters are due in the Recreation office before first game.***



Awards: Season Champion: 15 individual shirts
Playoff Champions: 15 individual shirts

A.S.A. rules and regulations govern all leagues.
League games will begin the week of April 30th.
Teams may begin and end a game with eight players.
MANAGERS: Teams can pick-up schedules and supplies beginning Thursday, April 18th at the *Recreation Office, 1600 N. Campbell (just south of 12 Mile Rd.) Office hours are Monday – Friday 8:30 – 4:30.*

- **NO SPOTS RESERVED.**
- **You are officially in the league when payment of $575 and completed team application is received.**

We accept payment by Cash, Check, VISA, MasterCard and Discover.

CITY OF ROYAL OAK - DEPARTMENT OF RECREATION AND PUBLIC SERVICE
TEAM APPLICATION BLANK - 2012

Adult Softball

Team Name_____

Sponsor's Name_____

League Desired (Day & Division) _____

.....

Manager's Name_____

Address_____

City & Zip_____

Home Phone (with area code) _____Work (with area code) _____

e-mail address _____

.....

Asst Mgr Name_____

Home Phone (with area code) _____Work (with area code) _____

e-mail address_____

.....

Amount enclosed $_____

Payment Method: ☐ Check ☐ Cash

☐ Visa# _____ CVV2_____
(on back)

☐ MasterCard# _____ CVC2_____
(on back)

Cardholder Name _____

Expiration Date _____

Signature of Cardholder _____

You may register in person, by mail or fax. **NO TELEPHONE REGISTRATIONS**

Mailing Address: **Royal Oak Recreation**
211 Williams
PO Box 64
Royal Oak MI 48068

In Person: **ROYAL OAK RECREATION**
1600 N. Campbell
Royal Oak MI 48067
Office Hours: Mon-Fri, 8:30 am – 4:30 pm

(248) 246-3180 ● **Fax (248) 246-3007**

ROYAL OAK RECREATION
Team Roster

_____ League

_____ Team Name

Manager_____ Address _____ City,Zip_____ Home# _____

Work# _____

Asst Mgr _____ Address _____ City,Zip _____ Home# _____

Work# _____

	Player's Name	Birthdate	Address	City/Zip	Home Phone	Work Phone
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

Players <u>must</u> fill out both sides of the roster completely in order for the roster to be valid.

Player Waiver, Release of Liability and Indemnification Agreement Roster

I, the undersigned player, acknowledge, agree and understand that:

1. Voluntarily and of my own free will, I elect to participate as a member of the softball team and league indicated below and on the reverse.
2. I understand that there are certain risks and hazards involved in participating in softball that may result in injury or death to me or other players including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants.
3. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death.
4. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and other players.

Further, I, the undersigned player, agree that in consideration for the right to play as a member of team designated below and on the reverse and in consideration for permission to play on the fields arranged for by the team or league:

1. I voluntary elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team and league designated below and on reverse, the fieldowner or other entity designed below, the Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or Amateur Softball Association of America for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

Team Name _____ CITY OF ROYAL OAK REC. LEAGUE CITY OF ROYAL OAK FIELD OWNER

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

	PRINT NAME	SIGNATURE	DATE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
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