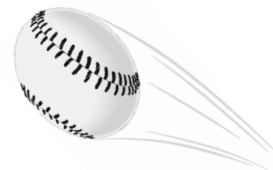


Summer Adult Softball 2010

Team Registration



City of Beaver Creek
 Department of Parks, Recreation & Culture
 789 Orchard Lane, Beaver Creek, OH 45434
 www.ci.beavercreek.oh.us
 937-427-5514



REGISTRATION: In person or by mail with payment of cash or check. Check should be made payable to *The City of Beaver Creek*. Over the phone or on the internet with payment of credit card. A 6.5% convenience fee will be assessed with all credit card payments.

REGISTRATION DEADLINES:

For the same league in 2009.....December 4, 2009 - January 8, 2010
 For waiting list to change leagues from 2009.....January 11 - January 15, 2010
 First come, first serve, all remaining spaces.....January 18 - April 9, 2010

LEAGUES:

Day	Time	Category	Day	Time	Category
Monday	6:00pm	Men's D	Wednesday	7:10pm	Co-Ed
Monday	7:10pm	Men's D	Thursday	6:00pm	Co-Ed
Monday *	8:20/9:30pm	Men's D	Thursday	7:10pm	Men's Church
Tuesday	6:00pm	Co-Ed	Thursday *	8:20/9:30pm	Men's D
Tuesday	7:10pm	Co-Ed	Friday	6:00pm	Men's D
Tuesday *	8:20/9:30pm	Men's E	Friday	7:10pm	Men's C
Wednesday	6:00pm	Co-Ed	* = plays under the lights		

HOME RUN LIMITATIONS:

Men's C = +3 then progressive Men's Church = +1 then progressive
 Men's D = +1 then progressive Co-Ed = +1 then progressive
 Men's E = No Home Runs

ROSTER: All players must be 18 years of age or older.

FEES: League fees are due at the time of registration. League fees include USSSA sanctioning.

\$480 per team, per league
 \$495 under the lights (8:20/9:30 leagues)
 \$455 each additional league with the same team name and same roster
 \$100 deposit will hold a spot in a league, with balance due by February 26, 2010
 Letter of intent will be excepted for those teams with a sponsor.

Teams that are being sponsored by a company may submit a letter of intent to reserve a spot in their desired league. This letter must be on the company's letterhead, with the following information listed: intended league (including night, time and category), manager's name, address and phone number and league fee. Full payment will be due 1 month prior to start of league.

SEASON: Week of May 3 - August 2 and the following 2 Mondays, August 9 & 16 due to Holiday Make-ups. (14 week season)

RAIN MAKE-UPS: Saturday & Sunday, June 19 & 20, July 31 & August 1, and August 7 & 8, 2010

MANAGERS MEETING: Wednesday, April 14, 2010 at 7:00pm at CI Beaver hall, 3696 Highmont Street, Beaver Creek

TEAM NAME _____ **DAY:** M T W TH FRI Coed Teams:
MANAGER'S NAME _____ **TIME:** 6:00 7:10 8:20/9:30 Just for Fun
MANAGER'S ADDRESS _____ **CITY** _____ **ZIP** _____ Competitive
MANAGER'S TELEPHONE (D) _____ **(E)** _____ **EMAIL** _____

- () NEW TEAM
- () RETURNING TEAM - SAME LEAGUE AS LAST YEAR
- () RETURNING TEAM - DIFFERENT LEAGUE FROM LAST YEAR

Receipt _____ Amount _____ Date _____ **Office Use Only** Revised 10/09
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