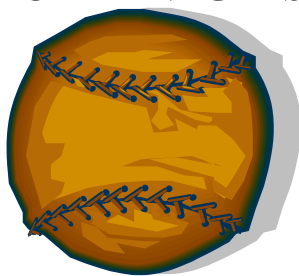


**2006 Fall Softball**  
**INFORMATION FOR MANAGERS AND SPONSORS**



**CITY OF RALEIGH PARKS & RECREATION DEPARTMENT**  
**ATHLETIC OFFICE**  
**2401 WADE AVENUE**  
**PHONE: 831-6836**

**FAX: 831-6838 WEB: [www.raleighnc.gov](http://www.raleighnc.gov)**

**PLEASE RETAIN THIS SHEET FOR YOUR INFORMATION/REGISTRATION:**

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1. **REGISTRATION:** Will be held on **July 24 - 27, 8:30 a.m.-6:00 p.m.** at the Parks and Recreation Athletics Office.

2. **REGISTRATION FEES:**

**\*\*All Fees Must Be Paid With a Check or Money Order\*\***

**\*\*Made Payable To The City Of Raleigh.\*\***

**\*\*Return Check Charge \$25.00\*\***

**\*\*Cash Can Not Be Accepted.\*\***

**TEAM LEAGUE ENTRY FEE:** is **\$385.00** per team.

Full refunds are available thru **July 27<sup>th</sup>**. (**Leagues consist of a 12 game season**)

**PLAYER PARTICIPATION FEES:** All Non-city residents **must** pay a **\$24.00** participation fee per softball season. One check or money order written when making application.

3. **DIVISION OF PLAY** Play is divided into the following divisions.

**Men's Open Division:** This division is open to all men's teams.

**Closed Division:** This league is open to teams whose source of players is restricted to employees of the same firm or governmental subdivision. Employees must work the minimum number of hours worked by the average full-time employee of the firm.

**Church Division:** This division is open to teams of churches and religious institutions. Players must attend services at the institution they are representing at least three times a month.

**Coed Division:** This division is open to all teams whose roster contains both males and females and who wish to play in the coed league. Coed positioning shall include two males and two females in the outfield, two males and two females in the infield and one male and one female in the pitcher-catcher positions. The batting order in coed shall alternate sexes at all times.

**Fraternities, Civic Clubs, National Chartered Organizations, and other approved Organizations:** This division is open to all teams whose source of players is restricted to members in good standing of a National Charter Organization.

**Leagues:** Each Division is divided into Leagues (A,B,C,etc.) based on team talent, prior league finishes and nights of play.

4. **SCHEDULES:** Will be available at the Athletic Office on August 10<sup>th</sup>.
5. **RULES MEETING:** Will be held Aug. 3<sup>rd</sup> at 6:30pm Location TBA.
6. **PRACTICE TIMES:** The first team to register will be the first team to make a reservation. At this time teams may reserve (3) practice sessions between July 31st – August 7th. These free practice sessions are 1 ½ hrs. without lights. Lights are \$25 per hour.
7. **Non-City Resident Roster additions must be done in person.** City-Resident Roster additions can be done in person, faxed or mailed. A player is not considered to be on a team roster until all participation fees have been paid and a signed player addition form has been received at the Athletic Office. If an addition form is faxed or mailed, **the player is not eligible until the Athletic Office receives it. Faxes done after 5:15 will not be eligible for that night's game.**
8. **OPENING WEEK OF PLAY:** August 14<sup>th</sup>.
9. **LAST DAY TO ADD:** players to team rosters is September 27<sup>th</sup>.
10. **TOURNAMENT PLAY:** All teams interested in participating in the City Championship Tournament must register at the Athletic Office by **5:00 p.m. on September 22nd**. Registration fee is \$50 per team.

**In Divisions of Play with eight or more leagues, there will be two tournaments.**

**Division I Tournament:** Comprised of teams from the top half and any team from a lower league.

**Division II Tournament:** Comprised of teams from other lower leagues in the Division of Play.

11. **RAIN OUT GAMES:** Managers are responsible for calling the Athletic Leisure line at 831-6575 to determine if games will be played. Teams should report to the playing site if the leisure line does not indicate condition red. Make-up games will be played at the end of the season (possibly on dates other than your normal nights of play). Teams may play more than two games per day on make-up days. Rain make-up schedules will be sent out to team managers near the end of the season. You may also access [www.raleighnc.gov](http://www.raleighnc.gov) for cancellation information.
12. **TEAM TROPHIES OR PLAQUES:** will be awarded to League Champs and Tournament runner-up. Tournament Winners will receive a team trophy and individual awards.
13. **UNIFORMS:** Each team is responsible for providing their own uniforms. Team uniforms must be the same color, duplicate numbers will not be permitted. Numbers should be at least 6 inches tall and be located on the back of the uniform. Violations of the uniform rule may result in forfeiture of ball games.
14. **INSURANCE:** The City of Raleigh does not carry insurance to cover adult athletic participants for accidents, injuries, etc. Supplemental insurance may be purchased through the Athletic Office.
15. **RULES:** Each team will be issued a City of Raleigh Adult Softball Rule Book at registration. Team managers must discuss the rules and the Code of Conduct with each player prior to the season. Each player is responsible for knowing the rules before stepping onto the field.

**FOR OFFICE USE ONLY**

Entry Fee Pd.: \_\_\_\_\_

Part. Fee P.: \_\_\_\_\_

Tourn. Fee Pd.: \_\_\_\_\_

Total Fee Pd. : \_\_\_\_\_

Receipt #: \_\_\_\_\_

Check #: \_\_\_\_\_

Staff Initials: \_\_\_\_\_

**CITY OF RALEIGH PARKS AND RECREATION  
ADULT FALL SOFTBALL TEAM ENTRY FORM  
2006**

(PLEASE TYPE OR PRINT)

Name of Team: \_\_\_\_\_

Name of Team:         8 character limit

As You Want It To Appear On Schedule

Team Manager: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

\*\*Team Info Will Be Mailed To This Person\*\* Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ City: \_\_\_\_\_

League Preference: Circle One

- 1. Men's Open
- 2. Church
- 3. Closed (Employees Only)
- 4. One Night Week
- 5. Coed

Team Status: Circle One

Returning

Combination of Past Teams

New Team

Team Placement Information

Every Attempt is made to place teams into leagues with teams of similar skill level.

<u>Season</u>	<u>Team Name</u>	<u>League</u>	<u>Finish</u>
_____	_____	_____	_____
_____	_____	_____	_____

Estimation of Team Talent: Circle One

Excellent      Above Average    Average      Below Average    No Skill

Special scheduling requests: Specific site and nights of play requests cannot be guaranteed.  
Please attach your request in writing.

\*\*Initial here if you give permission for your address and/or telephone numbers to be given out to persons requesting them for any reason. INITIALS \_\_\_\_\_

**ADULT FALL SOFTBALL CITY TOURNAMENT  
2006 REGISTRATION FORM**

Team Name \_\_\_\_\_

**Your Division:** (circle one)

Men's Open          Closed          Church          Coed  
One Nite Week          Women's Fast

**Your League** (circle one)

**A          B          C          D          E          F          G          Other:** \_\_\_\_\_

**Please fill out all information.**

Team Manager \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email address \_\_\_\_\_

You must return this form and a \$50.00 tournament entry fee to the athletic office no later than Sept. 22. You must be a City League team to enter.

**Tournament Information:**

1. The City Tournament will begin after the regular season has ended.
2. Teams will be seeded according to their standings about 80% through League play.
3. The City Tournament will be played in single elimination format.
4. Tournament games may be played at a different location and day of the week than a team's regular season schedule.
5. There are no time limits on tournament games.
6. Run rules still apply during the tournament games.

**Waiver, Release of Liability and Idemnification Agreement**

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 team indicated on this roster in the City of Raleigh Adult League.
2. I understand that there are certain risks and hazards involved in participating in sports that may result in injury or death to me or other players, including but not limited to those hazards associated with weather, field/facility conditions, equipment, and other participants.
3. I understand that the very nature of athletic events is hazardous or 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 or stationary objects, all of which can cause serious injury or death to me and to other players.

Furthermore, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated on this roster and in consideration for permission to play at the facility arranged for by the team or league:

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing 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 players on my team, and while on or upon the premises of any and all of the facilities arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team designated on this roster, the City of Raleigh, the field owner, or their owners, officers, agents, servants, associations, employees or any person or entity connected with the team, league or facility for any claim, damages, costs or cause of action which I have or may have 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.

**City of Raleigh Parks & Recreation Adult Roster**

**Team:** \_\_\_\_\_ **Division:** \_\_\_\_\_ **League:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Player Affidavit: Each Player Must Read The Following Statement And Sign Below Before They Can Participate**

**I understand that by signing this roster I am under contract to play for the above named team. I certify that the below information is correct, and I am aware that I cannot play on another adult team within the same division in the Raleigh Parks & Recreation League for the current season until properly released. I agree to abide by all rules and by-laws as set forth by the Raleigh Parks & Recreation Department. Furthermore, I acknowledge that I have read and that I understand each and every one of the provisions of the Waiver, Release of Liability and Indemnification Agreement to the left, and agree to abide by them. Additionally, I understand that Alcoholic Beverages and Weapons are not permitted on City Property.**

	Player's Name	Legal Address	Telephone Number		Ral. Res.		Player's Signature	Date	
			Home	Work	Yes	No		Add	Drop
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
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20									

I certify that I have investigated the information given above and found it to be correct to the best of my knowledge. In addition, I am aware that it is my responsibility to inform my players of all the rules and regulations of the Raleigh Parks and Recreation Adult League.

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Closed League Employment/Organization Membership Verification**

I certify that the players listed above are employed by and work the required full time hours as required by our company, or the players listed above are members in good standing with our National Charter Organization.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Personnel Director's / Organization Officer's Signature: \_\_\_\_\_

(Must be made by someone who is not on the team)

**Church League Verification**

I certify that all of the above named players attend services at least three times a month.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Pastor's signature: \_\_\_\_\_

(Must be made by someone who is not on the team)