



# 2021 Sunday Night Co-Rec Fun Softball League

This rapidly growing softball league is designed for men and women to enjoy Sunday evening low competition co-rec softball. Teams register by submitting a completed Team Roster along with a Team Waiver Form ([www.slprec.org](http://www.slprec.org)) and the entry fee. Fee includes game balls, umpires and end of season double elimination tournament plus awards. Tournament awards for first, second & third place.

For information email Wesley Goldberg at: [wgoldberg@slpmn.org](mailto:wgoldberg@slpmn.org).

**Register your team early, space is limited!**

## **Summer Season**

[10 wks.]: \$498.13/team

Games:

April 25 – July 11 (*no games May 30 & July 4*)

Game Times:

5:00, 6:00, 7:00 & 8:00pm.  
(3, 4 & 9pm if necessary depending on size of league)

Tournament:

Friday evening, July 16 & Saturday daytime/evening July 17  
(Sunday, July 18 weather back up if needed)

## **Fall Season**

[7 wks.]: \$391.01/team

Games:

August 1 – Sept 19 (*no games Sept 5, Labor Day*)

Game Times:

5:00, 6:00, 7:00 & 8:00pm.  
(3, 4 & 9 pm if necessary depending on size of league)

Tournament:

Friday evening, Sept 24 & Saturday daytime/evening Sept 25  
(Sunday, Sept 26 weather back up if needed)

*We are now required, by state law, to charge 7.125% sales tax on all adult leagues - this is included in the fee*

# SPRING LAKE PARK RECREATION DEPARTMENT

1301 - 81ST Ave. NE; Spring Lake Park, MN 55432

763-792-7201 www.slprec.org

## ADULT SOFTBALL LEAGUE TEAM ROSTER

TEAM NAME: \_\_\_\_\_ LEAGUE: Adult Sunday Night – Fun SEASON: \_\_\_\_\_ YR: \_\_\_\_\_

MANAGER'S NAME: \_\_\_\_\_ PHONE: H- \_\_\_\_\_ C- \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

I hereby verify that each player appearing on this Roster qualifies under the eligibility rules and will be made fully aware of all rules, regulations and the penalties for violations outlined by the Spring Lake Park Parks and Recreation Department. Team Fee must be submitted with the completed Team Roster and Waiver Form.

MANAGER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MANAGER'S EMAIL ADDRESS (required): \_\_\_\_\_

TEAM FEE: \_\_\_\_\_: CHECK: # \_\_\_\_\_ CASH:

Receipt # (Office Use Only) \_\_\_\_\_

	<b>PLAYER'S NAME</b> Please Print or Type	<b>HOME ADDRESS</b>	<b>CITY</b>	<b>ZIP</b>	<b>E-MAIL</b>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

**TEAM WAIVER/ELIGIBILITY/CONDUCT**

**DATA PRIVACY ACT WARNING**

In accordance with the Minnesota Government Data Practices Act, the recreation staff of the City of Spring Lake Park hereby informs you that personal information requested of you and your players is considered private. Although, for team identification purposes, the managers name and phone number will appear on schedules. Private data is available to City Staff who need to have this information to perform their duties, but not to the public. While you may choose to withhold this data, the consequences could be that the City’s Recreation Staff may not be able to complete your registration and/or you may not receive updated program information, such as schedule changes, revisions, and standings.

The below signed team participants, in consideration of your accepting this entry, I, along with my heirs, executors and administrators, hereby waive and release any and all rights, causes of action, and claims for damages I may have against the agency providing the activity and its representatives, successors and assigns for any and all injures, including but not limited to any injury suffered as a result of my exposure to communicable diseases such as MRSA, influenza, COVID-19, or any other communicable disease, suffered by myself at the activity sponsored by these groups. I also acknowledge that I have read the Data Privacy Warning as stated above and have completed this form with this knowledge.

I have read and understand the player Eligibility/Conduct/Forfeit fees requirements described previously in this packet for the participation in the Spring Lake Park Adult Softball League.

**Every Player must sign below before participating. (Must submit with Team Roster and Team Fee)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

- 11. \_\_\_\_\_
- 12. \_\_\_\_\_
- 13. \_\_\_\_\_
- 14. \_\_\_\_\_
- 15. \_\_\_\_\_
- 16. \_\_\_\_\_
- 17. \_\_\_\_\_
- 18. \_\_\_\_\_
- 19. \_\_\_\_\_
- 20. \_\_\_\_\_

\_\_\_\_\_  
TEAM NAME

\_\_\_\_\_  
Manger’s Signature

Adult League  
Season: \_\_\_\_\_ (Ages 18+)

\_\_\_\_\_  
Date