

IMPORTANT SOFTBALL DATES

Week of August 29 Fall Softball Begins

REGISTRATION DATES:

Begins July 5 All Champlin registration
 Begins July 8 09-10 Summer & Fall returning teams
 Begins July 12 New team registration
 Thursday, August 26 1st available day. Team schedule pick-up day (2:00 - 5:00 p.m.)
 (schedules will be emailed)

October 1 - 3 Fall League Tournament
 October 9 - 10 Mixed "D" Fall State
 October 16 - 17 Men's "D" Fall State

Fall League Tournament will determine USSSA State Tournament berths. All teams may purchase State Tournament berths for \$160.



REGISTRATION ENDS ON AUGUST 20

Teams will not be considered registered until the following information is submitted:

- * Team entry fee is paid
- * Team roster submitted
- * \$100.00 conduct deposit and registration form

**Teams may pay by cash, check or credit card. Please make checks payable to City of Champlin
 Mail to: Champlin Parks & Recreation, Attn. Andy Singleton, 11955 Champlin Drive, Champlin, MN 55316**

2010 FALL SOFTBALL REGISTRATION FORM

TEAM NAME _____ MANAGER _____

LEAGUE DESIRED _____ 1ST CHOICE _____ 2ND CHOICE _____

ADDRESS _____ CITY _____ ZIP _____

PHONE (H) _____ (W) _____ (Cell) _____

E-MAIL ADDRESS (used for standings, schedules, updates, etc.) _____

LEAGUES (all double headers)	All Champlin	1 - 4 Non-Residents	5 + Non-Residents	# of Games
Monday Boy's 19 & Under	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Monday Men's	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Tuesday Men's	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Tuesday Women's	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Wednesday Men's Competitive	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Wednesday Men's Recreational	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Wednesday Co-Rec.	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Thursday Men's Competitive	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Thursday Men's Recreational	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Friday Men's	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Friday Co-Rec.	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Sunday Co-Rec. Competitive	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Sunday Co-Rec. Recreational	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2
Sunday Men's	\$ 490.75	\$ 540.86	\$ 568.72	12 + 2

* * A 7.275% sales tax has been added to all adult leagues * *

Credit Card Payment (optional)			
Credit Card Number	Expiration Date	CVV Code (3 digit)	Amount Due

SIGNATURE _____ DATE _____



Softball Conduct Form

The Champlin Parks & Recreation Department has instituted a "Team Conduct and Eligibility Policy" for Adult Softball Leagues.

Each team will be required to pay a \$100.00 deposit fee for any league.

The conduct fee cannot be a check from your team sponsor. The conduct fee will not be cashed unless a violation occurs during the 2010 softball season. We will return your check in full pending no violations of the team conduct or player eligibility.

Teams will forfeit their Team Conduct and Eligibility fee for the following violations:

1. Alcohol consumption – during a game or on the bench or playing field.
(\$50 per incident)
2. Providing false information about in order to avoid paying non-resident fees.
(\$50 per incident)
3. Physical contact made with official or another player.
(\$100 per incident and ejection from the league)
4. Player ejection *(\$25 per ejection)*
5. Ineligible/unrostered player *(\$25 per violation)*
6. Unannounced forfeit – Less than 24 hours of scheduled game. *(\$25 per game)*
7. Any conduct deemed inappropriate by the Umpire Association or the Parks and Recreation Dept. is subject to fine and suspension or ejection from the league.

Teams must post another \$100.00 fee prior to their next game if they lose their initial conduct deposit due to violations.

TEAM NAME/UNIFORM POLICY

Team names must be in good taste and should not include references to drugs and alcohol or have sexual, racial or ethnic connotations. The City of Champlin Parks and Recreation Department reserves the right to request a change or to change any team name deemed inappropriate.

STATEMENT OF MANAGER/COACH

I wish to participate in the City of Champlin Adult Athletics Leagues and understand that my participation is voluntary. No one is forcing me to participate. I acknowledge the Activity is NOT an ESSENTIAL service provided by the City of Champlin. I understand that entering into and signing this agreement affects my legal rights and result in my giving up or waiving certain legal rights and I accept this and sign this agreement of my own free will.

I verify that each player listed is eligible according to league rules to play in the City of Champlin and that each player individually has read and understands the waiver agreement.



Signature and Date

Team Name



Athletic Team Roster

TEAM NAME _____ MANAGER _____

ADDRESS _____ CITY _____ ZIP _____

PHONE (H) _____ (W) _____

ASSISTANT MANAGER _____ PHONE _____

USSSA CLASSIFICATION "B" _____ "C" _____ "D" _____ "E" _____

- * Roster Changes must be made in person in accordance with league guidelines and state association deadlines.
- * This roster must be accompanied by the entry fee & waiver form and submitted no later than the indicated deadline date.
- * Did your team participate in the league last year? _____ If yes, team name _____

Players Name	Address	City & Zip	Home #	Work #
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
10)				
11)				
12)				
13)				
14)				
15)				
16)				
17)				
18)				
19)				
20)				