

**CITY OF MERCED PARKS & COMMUNITY SERVICES**  
**ADULT FALL SOFTBALL**

**REGISTRATION**  
**JULY 1ST- JULY 29TH**  
**\$500 per team (8 Games)**

**\*FULL PAYMENT MUST BE RECEIVED  
TO SECURE SPACE IN THE LEAGUE\***

**20 PLAYER MAXIMUM PER TEAM/ROSTER**

**LEAGUES:**  
**MEN'S (TUES)**  
**COED (THURS.)**

**SEASON BEGINS WEEK OF AUGUST 19TH**  
**SEASON ENDS WEEK OF OCTOBER 21ST**

**MANAGER'S  
MEETING**

**JULY 29TH, 2024**  
**SAM PIPES ROOM**  
**678 W 18TH ST.**

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**COED: 5:30 PM**  
**MEN'S: 6:30 PM**



632 W. 18th St. Merced  
Hours: 9:00 AM - 5:00 PM  
(Closed 12:00 PM - 1:00 PM)

For more information call (209) 385-6235 or email [martinezf@cityofmerced.org](mailto:martinezf@cityofmerced.org)

PARKS AND COMMUNITY SERVICES DEPARTMENT  
**ADULT SOFTBALL REGISTRATION FORM**



MEN'S CO-ED SOFTBALL

(A registration form and roster are required for EACH LEAGUE)

LEAGUE I (Upper) LEAGUE II (Middle) LEAGUE III (Lower)

(Number of leagues based on number of registered teams)

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

<b>GAME SCHEDULE</b>					
Due to scheduling difficulties, we cannot guarantee your preferred game time. Games will be starting at 6pm.					
Game Nights	MONDAY	TUESDAY (MEN'S)	WEDNESDAY	THURSDAY (COED)	FRIDAY
<b>NO REFUNDS OR CHANGES MADE AFTER THE GAME SCHEDULE HAS BEEN COMPLETED</b>					

ALL CORRESPONDENCE WILL BE **EMAILED** TO THE MANAGER

**TEAM MANAGER INFORMATION**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_  
 E-MAIL \_\_\_\_\_

**SPONSOR INFORMATION**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

\*\*\*\*\*IMPORTANT\*\*\*\*\*

- Games are played Monday thru Friday evenings at Joe Herb Park.
- Fees must be paid by designated deadline, and the manager is solely responsible for payment of the registration fee Teams wishing to participate in the league after the manager's meeting are subject to a late fee, and they are not guaranteed entrance into the league unless an opening exists.
- Players are allowed to play on a Men's or Women's team in addition to a Co-ed and an Industrial team. At no time may a player play on two (2) different men's or women's team. Same rule applies to Co-ed and Industrial.
- All managers and players are responsible for knowing the *Rules and Regulations* of the Adult Softball League and the *Participant Code of Conduct* for adult sports as set forth by the Parks and Recreation Department. Copies are available upon request at the Parks & Recreation office (632 W. 18<sup>th</sup> St. Merced, CA 95340 385-6235).
- Managers of teams are directly responsible for the conduct of their players at all times.
- THE PLAYER IN HIS/HER OWN HANDWRITING MUST SIGN THIS AGREEMENT PRIOR TO SEASON BEGINNING. Any person signing this roster becomes the property of the above team until released by the Manager of the team. Any player who registers to play with more than one team in a given league is FROZEN on the team for which he/she FIRST plays a game.

## CITY OF MERCED OFFICIAL WAIVER & RELEASE OF LIABILITY & INDEMNIFICATION

**VOLUNTARY ASSUMPTION OF RISK FORM:** I hereby acknowledge, that I have voluntarily registered to participate in the Merced Adult Softball program. I am aware that activities/events involving the sport of softball can be hazardous and pose certain risks, including, but not limited to weather conditions, playing conditions, equipment and other players. I am voluntarily participating in these activities/events with knowledge of the danger involved and hereby agree to accept any and all risks of injury or death. In consideration for my being permitted to participate in this Program, I hereby release, discharge and waive any and all claims against the City of Merced, its employees, referees, umpires or other agents, for any personal injury or property damage arising out of my participation in this Program. I am fully aware that the City of Merced does not carry medical, accident, or property damage insurance for this program. I have carefully read this statement of voluntary release and assumption of the risk and fully understand its contents. I am aware that this is a release of liability and a contract between myself and releasees, and I sign it of my own free will. I voluntarily sign my name evidencing my acceptance of the above provision.

PLAYER'S NAME (please print)	PLAYER'S SIGNATURE	EMAIL ADDRESS	ZIP	PHONE NUMBER
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
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10.				
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17.				
18.				
19.				
20.				

(manager's name)

(team name)

**MANAGER'S AGREEMENT:** This is an agreement between \_\_\_\_\_ of the \_\_\_\_\_ and the City of Merced Parks & Recreation. The manager is responsible for the filing of the official roster and certifies that all players listed on that roster are eligible for play in City of Merced Parks and Recreation Sports Leagues. The manager is also responsible to see that his/her team complies with the rules attached and referred to herewith and any other regulations set forth by the City of Merced Parks and Recreation relative to the operation of the City of Merced Sports Programs. **TEAMS MUST PROVIDE OWN INSURANCE:** The City of Merced does not carry medical or accident insurance on any of its City programs. This responsibility lies with each individual on a team. Insurance coverage is available through the appropriate softball governing body. **\*I CERTIFY THAT ALL THE PLAYERS LISTED HAVE READ THE ABOVE VOLUTARY ASSUMPTION OF RISK AGREEMENT BEFORE AFFIXING THEIR SIGNATURE.**

**MANAGER'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_