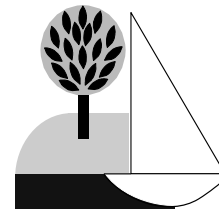


**City of Foster City  
Parks and Recreation Department  
Sports Division  
Registration Information**



**2006 Adult Summer Softball League**

Foster City would like to thank you for your interest in our upcoming season. Foster City's Adult Summer Softball Season will start the week of July 23 and end in October. The season runs 10 weeks with the top four teams making playoffs. We have provided all information to make registration easier for you. Registration deadline is **5:00 p.m. on Thursday, June 29, 2006.**

**League Information**

Season Dates:	July 23 – October 29
Location:	Edgewater Softball Field
Game Times:	6:30, 7:30, and 8:30 PM (Weeknights) 3:00 PM- 8:30 PM (Sundays)
Teams:	7 Teams Per Division (Max)
League Fees:	\$680/team (Men's & Coed C Divisions) \$520/team (Coed D Divisions)

**TO APPLY:**

Team managers must submit the following:

1. Summer 2006 Adult Softball Team Application.
2. An official team roster, note non-res. that work in Foster City
3. Proof of residency for each player that lives in Foster City.
4. League Fee (Payable to City of Foster City)
5. Team name, preferred night, number of players who work in Foster City, number of Foster City residents, and number of seasons team has played in the Foster City League written on the envelope.

**PRIORITY:**

Teams will receive 1 point for each Foster City Resident on its roster, 2 points for each non-resident who works in Foster City (provide business card), 2 points for each season the team has been in the Foster City league (verified through Foster City records). It is the responsibility of the manager to provide proof of residency and resident workers on the team. Points will not be awarded if proof is not provided by the registration deadline. The teams with the most points will be accepted into the league. Registration is first come, first served after the registration deadline, provided there is still space available.

**PROOF OF RESIDENCY:**

All Foster City residents must have proof of residency. The only proof of residency accepted will be a copy of a VALID California Driver's License. If the address on the license has been crossed off and a new address is on the back, a DMV stamp must be on the back of the license. If a player does not have a driver's license, the only other item that will be accepted as proof of residency is a copy of a DMV identification card.

**ROSTERS:**

1. **NOTE: All players must sign the roster/waiver.**
2. All rosters must be complete.
3. Teams must carry a minimum of 12 players and a maximum of 18 players on their roster.
4. Players may only be added or dropped before the fifth league game.

**NOTE:** A player can only be on one softball team in the City of Foster City Softball League (Co-ed, Men's, Women's and Senior leagues treated separately).

**MANAGERS MEETING:**

A **MANDATORY** Manager's meeting will be held **Thursday, July 13 at 8:00pm** in the **Foster City Library Community Center, 1000 E. Hillsdale Blvd., Foster City.** League Rules will be covered and all managers are responsible for knowing the league rules. Schedules will also be distributed at this meeting. The team manager is responsible for picking up schedules.

**LEAGUE DIRECTOR:**

The League Director shall:

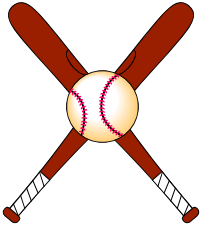
1. Determine the number, classification and type of leagues offered.
2. Shift teams from one league to another in order to provide a more balanced league.
3. Govern the league according to ASA and league rules.

**GENERAL INFORMATION**

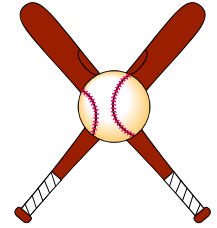
The next season will be the 2007 spring season, which will begin in March. If you do not receive the registration information by the middle of January, call us at 286-3392. **Always notify the Recreation Center if you move or change e-mail addresses so that we can keep our mailing list up to date. If you wish to have you name deleted from our mailing list, please call us.**

Teams registered in the Foster City softball league may reserve the field for practice on Saturday mornings/afternoons. It may be reserved for 2 hour time slots on the even hour (i.e. 12-2, 2-4, etc.). A reservation without lights is no charge. A 2-hour reservation with lights will be \$30. Applications for field use may be picked up at the front desk at the Recreation or Community Centers. Applications for league teams are accepted no more than 14 working days before the use date. Please call 286-3392 to check on availability.

**For more information, please call Foster City Parks and Recreation at 286-3392.**



City of Foster City  
Parks and Recreation Department  
Sports Division



**2006 Adult Summer Softball Team Application**

Please indicate the leagues you would consider your team to play in. Label the leagues in order according to your preference (i.e., put "1" by your first choice and "2" by your second choice etc.). Use one entry form for each team entered.

_____ Sunday Men's D3 Division (2-pm-6pm)	_____ Wednesday Coed D1 Division (one umpire)
_____ Sunday Men's D2 Division (6:30-pm-9:30pm)	_____ Thursday Men's D1 Division
_____ Monday Coed C Division	_____ Friday Coed D2 Division (one umpire)
_____ Tuesday Men's C5 Division	

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

Manager's Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

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

E-mail \_\_\_\_\_

Asst. Manager's Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

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

Did this team play in a league last year? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes? Where: \_\_\_\_\_ Level: \_\_\_\_\_ Record: \_\_\_\_\_  
If played in Foster City, how many seasons? \_\_\_\_\_

I hereby request placement of the above-named team in City of Foster City 2006 Adult Softball League. I understand that all participants on this team will abide by all rules and regulations set by the City of Foster City Parks and Recreation Department. I realize that any falsification of roster or failure to follow league rules may result in the above-named team and its players being dropped from the activity, and forfeiture of all fees paid. I realize if my team has registered been expected in the league, and then drop out of the league I risk forfeiting fees pay.

I hereby certify that the above information is correct and understand that the League Director has the right to put my team in an appropriate league.

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

City of Foster City  
Parks and Recreation Department  
Sports Division

**ADULT SOFTBALL ROSTERS & WAIVERS**

TEAM NAME: \_\_\_\_\_ LEAGUE: \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE(H) \_\_\_\_\_ (W) \_\_\_\_\_

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

E-MAIL \_\_\_\_\_

**Player Waiver, Release of Liability and Indemnification Agreement**

I, the undersigned player, acknowledge, agree and understand that:

1. Voluntary and of my own free will, I elect to participate as a member of the softball team and league indicated above.
2. I understand that there are certain risks and hazards involved in participating in softball that may result in injury or death to me or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants.
3. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death.
4. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players.

Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated above and in consideration for permission to play on the fields arranged for by the team or leagues:

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing 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 other players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team and league designated above, the field owner or other entity designated above, The City of Foster City, The Amateur Softball Association of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or Amateur Softball Association of America for any claim, damages, cost or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to negligence, breach of contract or wrongful conduct of the parties hereby released.

**I acknowledge that I have read and that I understand each and every one of the above provisions in this waiver, release of liability and indemnification agreement and agree to abide by them.**

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

**READ AND COMPLETE BOTH SIDES OF THE WAIVER**

**CITY OF FOSTER CITY  
ADULT SOFTBALL LEAGUE ROSTER & WAIVER**

	NAME	SIGNATURE	ADDRESS	CITY	ZIP	HOME PHONE	WORK PHONE	AGE
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**READ AND COMPLETE BOTH SIDES OF THE WAIVER**