Registration Information

2024 Adult Summer Bocce Ball League

Foster City would like to thank you for your interest in our upcoming season. Foster City's Adult Summer Bocce Ball Season will start the week of June 3. The season runs 10 weeks with 4 teams making playoffs. We have provided all information to make registration easier for you. **Registration begins April 15th and registration deadline is 5:00 p.m. on Wednesday, May 22nd.**

League Information

Season Dates: Starts week of **Juen 3, 2024**

Location: Leo Ryan Bocce Ball Courts

Game Times: 12:00, 1:00, 2:00, 3:00 (Monday Afternoons)

5:15, 6:15. 7:15 (Wednesday Evening) 6:30, 7:30, 8:30 (Thursday Evening)

Teams: 10 Teams Max Per Division

League Fees: \$130 per team

(a team consists of min: 4 & max: 8 players)

TO APPLY: Team managers must submit the following:

- 1. Summer 2024 Adult Bocce Ball Team Application.
- 2. An official team roster.
- 3. League Fee (Check Payable to: City of Foster City)
- 4. Team name, preferred night,

GENERAL INFORMATION

Upcoming 2024 Seasons

2024 Fall Season will begin week in last week of August.

Always notify the Recreation Center if you change e-mail addresses so that we can keep our mailing list up to date. For more information, please call Foster City Parks and Recreation at 286-3379.

2024 Adult Summer Bocce Ball 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.

Monday Afternoon Wednesday Evening Thursday Evening	AND REC	REATION						
Team Name								
Captain's Name	Phone (H)	(W)						
Address	City	Zip						
E-mail								
Asst. Captain's Name	Phone (H)	(W)						
Address	City	Zip						
Did this team play in a league last year? YesNo I hereby request placement of the above-named team in City of Foster City 2024 Adult Bocce Ball 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						

ADULT BOCCE BALL ROSTERS & WAIVERS

TEAM NAME:	LEAGUE:						
MANAGER'S NAME	PHONE (H)	(W)					
ADDRESS	CITY	_ZIP					
E-MAIL							
Player Waiver, Release of Liability and Indemnifica	tion Agreement	0					
I, the undersigned player, acknowledge, agree and understan	d that:						
1. Voluntary and of my own free will, I elect to participate above.	as a member of the Bocce Bal	I team and league indicated					
2. I understand that there are certain risks and hazards invo death to me or other players, including, but not limited to conditions, equipment and other participants.							
3. I understand that throwing a Bocce Ball is dangerous to death.	me and to other players and m	ay result in serious injury or					
 I understand that the very nature of the game of Bocce B acts of throwing, fielding and retrieving of the ball, strete objects, all of which can cause serious injury or death to 	ching, and collisions with other						
Further, I, the undersigned player, agree that in consideration above and in consideration for permission to play on the cou							
1. I voluntarily elect to accept and assume all risks of injury a member of the team so designated, (b) while serving in play by other teams of by other players on my team, and arranged for by my team or league for practice or play.	a non-playing capacity as a te	am member during practice or					
2. I release, discharge and agree not to sue the team and leadesignated above, The City of Foster City, The World Bassociations, employees, or any person or entity connected Association for any claim, damages, cost or cause of actinjuries or damages sustained or incurred by me from who for contract or wrongful conduct of the parties hereby release.	occe League, or their owners, or with the team, league, field on which I have or may in the latever cause including but not	officers, agents, servants, or United States Bocce future have as a result of					
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 BOCCE BALL LEAGUE ROSTER & WAIVER

	NAME	SIGNATURE	ADDRESS	CITY	HOME PHONE	CELL PHONE
1		185			3	
2			Y			
3		7 : \ 7	/			V
4						
5						
6						
7						
8						

READ AND COMPLETE BOTH SIDES OF THE WAIVER