

Waldoboro Recreation Department

2016 Adult CO-ED Softball Registration

League coordinator: Rec. Dir. Kyle Santheson, office: 832-5369 (x308), e-mail: rec@waldoboromaine.org

Location: Waldoboro Little League Field, Medomak Valley High School. Medomak Middle School or ADG

Time: Games will be played on weekday evenings and Sunday afternoons. Teams play twice a week. (subj to change)

Dates: League play begins mid-August 2016 and concludes with a playoff tournament around first week of October.

Ages: This league is primarily for older adults. The league will accept any adult (18 and out of HS) player as long as the average age of the lineup on game day is at least 33.

Teams: Unlimited roster per team, 10 players on field at a time, (3 must be woman), all players in dugout bat, men must use league provided wooden bats only. *See rules for other restrictions*

Fee: \$20 per player is due with registration or when a complete roster is submitted. Teams will not be eligible for play until payment is received.

Program notes: There have been many CO-ED teams, leagues and tournaments that are extremely competitive. This league will not be one of those. This league will truly be a recreation league with emphasis on having some fun and enjoying the game of softball. This is a no-umpire, no alcohol league. Playing rules have been established and are available at the Waldoboro Town office. Please feel free to call the Recreation Director with any questions at 832-5369 (X308).

Registration form and a \$200 deposit is due to the Recreation Department no later Monday, August 8th 2016! Remainder of registration fee of \$20 per person is due prior to 1st game.

ALL PLAYERS must be registered to play. Rosters FREEZE after the 3rd "scheduled" game.

FEE PAID: cash_____ check_____ Received by:_____ Date:_____

WALDOBORO CO-ED SOFTBALL TEAM REGISTRATION FORM - 2016

Team Name: _____

By signing this form, you acknowledge that you are familiar with, and will abide by all League rules. In addition, you agree to waive and release any and all claims you have against the Town of Waldoboro, Waldoboro Little League and MSAD 40 including their agents, employees, paid & non-paid volunteers, officers, leaders, sponsors and organizers. This includes injuries sustained in connection with this program. I understand that although a physician's examination is not required for registration, it is highly advisable that any participant consults with a physician before participation in athletic and strenuous activities.

Name (print)	Age	Home Phone	Cell	Signature	Town
1. <u>Manager:</u>	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____	_____
11. _____	_____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____	_____
13. _____	_____	_____	_____	_____	_____
14. _____	_____	_____	_____	_____	_____
15. _____	_____	_____	_____	_____	_____
16. _____	_____	_____	_____	_____	_____
17. _____	_____	_____	_____	_____	_____
18. _____	_____	_____	_____	_____	_____
19. _____	_____	_____	_____	_____	_____
20. _____	_____	_____	_____	_____	_____