

Richfield Recreation Services

2012 Spring/Summer Adult Softball Registration Form

REGISTRATION DEADLINE: FRIDAY, APRIL 6

TEAM NAME: _____		RETURNING TEAM? <input type="checkbox"/> Yes <input type="checkbox"/> No	
IF YES, 2011 SPRING/SUMMER TEAM NAME: _____			
LAST YEAR'S LEAGUE: <input type="checkbox"/> Sun <input type="checkbox"/> Mon <input type="checkbox"/> Mon Church <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu			
MANAGER NAME: _____	HOME #: _____	CELL #: _____	WORK #: _____
MGR'S ADDRESS: _____	CITY: _____	ZIP: _____	E-MAIL: _____
ALTERNATE CONTACT NAME: _____	HOME #: _____	WORK #: _____	

2012 SPRING/SUMMER LEAGUE OPTIONS

MONDAY NIGHTS Begins April 30	
Men's C/D (12 teams, 22 games, double headers)	<input type="checkbox"/> Resident \$725 <input type="checkbox"/> Non-Resident \$775
Church League (8 teams, 12 single games)	<input type="checkbox"/> Resident \$585 <input type="checkbox"/> Non-Resident \$635
TUESDAY NIGHTS Begins May 1	
Men's C (8 teams, 22 games, double headers)	<input type="checkbox"/> Resident \$725 <input type="checkbox"/> Non-Resident \$775
WEDNESDAY NIGHTS Begins May 2	
Men's D (12 teams, 22 games, double headers)	<input type="checkbox"/> Resident \$725 <input type="checkbox"/> Non-Resident \$775
THURSDAY NIGHTS Begins May 3	
Men's D (8 teams, 12 single games)	<input type="checkbox"/> Resident \$585 <input type="checkbox"/> Non-Resident \$635
Men's D (12 teams, 22 games, double headers)	<input type="checkbox"/> Resident \$725 <input type="checkbox"/> Non-Resident \$775
SUNDAY NIGHTS Begins May 8	
Co-Rec (8 teams, 14 games, double headers every other wk)	<input type="checkbox"/> Resident \$625 <input type="checkbox"/> Non-Resident \$675

To be considered a resident team, no more than 4 players can live or work (includes airport) outside of Richfield.

MANAGER'S SIGNATURE: _____ OR INITIALS (E-SIGNATURE) _____
My signature or initials above confirm that the above league information is correct.

Make checks payable to City of Richfield and submit to 7000 Nicollet Ave S Richfield MN 55423	Office Hours Monday – Friday 8:30 a.m. – 5:00 p.m. Office 612-861-9385 Fax 612-861-9388 dweseloh@cityofrichfield.org
---	--

NOTE: TEAMS NOT FULLY PAID BY FRIDAY, APRIL 6 WILL BE SUBJECT TO AN ADDITIONAL LATE FEE.

Payment Amount: _____

CREDIT CARD: Visa MC Discover **CHECK** (Number _____) **CASH**

CARD NUMBER: _____ EXP DATE: _____

STAFF COMPLETES: Date Received: _____ Balance paid by 4/6/12 (staff initial): _____