MERIDIAN Team Registration For	m
INSTRUCTIONS: All fields are required. To register for the 2024 Spring/Summer Softball League registration form with your team fee, player fees, and a signed official roster to the Meridian Parks by: Thursday, March 7th, 2024 by 5 p.m. Spots are on a first-come, first-serve basis and payment is received in full. Paperwork and payment must be received by the deadline and spots open. (If paying with two or more forms of payment types and/or multiple payees. Please instructions as payment processes have changed.)	e. Return the filled-out and Recreation Office not guaranteed until ad still have available
League Fees: (Includes 9 league games and End of Season Double Elimination TournameRegistration.)Player fees are non-transferable from player to Meridian Resident Player Fee - \$10Non-Resident	o player
Upon registration, each team will be allowed 1.5 hours of free practice time per week if field before the season starts.	elds are available
Team Name:	
Team Manager:Phone:	
Home Mailing Address:	
City:State:Zip:	
Email Address:	
 Teams you share players with (If Necessary) <i>list team name and coaches name</i>: City League and Division played Last Season: 	
Meridian:Division:Team Win/Loss Record:	
Other:Division:Team Win/Loss Record:	
Division desired this year: (1 is the highest level, 11 is the lowest.) PICK ONLY ONE.	
Coed: C3C4C5C6C7C8C9C10C11 Men's: M1M2M3M4M5M6M7 Scheduling format: Coed teams will play Monday, Wednesday, and Friday Men's teams will play Tuesday, Thursday, and Friday	Spots are not guaranteed until payment is received in full. Paperwork and
Friday's will be used as needed	payment must be received by the
Please give your top two choices: (Times are not guaranteed.)	deadline and still have available spots open.
6:15/6:30 p.m 7:30/7:45 p.m 9:00 p.m	available spots open.
 Ways to Register: First complete the current registration form and current roster form. Once, paper follow the below steps to complete and secure your team's spot in the league. *Sponsorship paymed deadline with current completed registration form, current roster form, team fee, and player fees. Phone-In - Call 208-888-3579 and pay over the phone with a credit card after emailing in both the form and roster form to recreation@meridiancity.org Walk-In - Come into our office at 33 E. Broadway Ave., Suite 206, with a completed registration form in person with cash, check, or credit card. Mail-In - Mail your completed registration form and roster with payment to 33 E. Broadway Ave., Su 83642. (Must be received by the deadline and still have available spots open.) 	ents must be in by the completed registration m and roster and pay
Payment Method (Office Use Only) Check #:Cash:Credit Card:In Person or Photo	ne:

_Amount Paid:_____City Receipt Number:_____ Received By:_

Date paid:_

CITY OF MERIDIAN PARKS & RECREATION DEPARTMENT 33 E. BROADWAY, MERIDIAN, ID 83642 208-888-3579 FAX: 208-898-5501 TEAM NAME	MERIDIAN -	Player fees are non-transferable from player to pla SPORT: Coed Men's Women's				
208-888-3579 FAX: 208-898-5501	COACH/MANAGER'S NAME_	YEAR:	2024			
HOME ADDRESS	CITY	STATE	ZIP			
PHONE (H)(W)	E-MAIL ADDRESS					

WAIVER AGREEMENT: I acknowledge that my participation in the above-written activity offered by the City of Meridian presents risks, some of which are unknown. I acknowledge that City's agents and employees will, as reasonable and feasible, follow protocols for preventing the transmission of disease, but I acknowledge that my participation in this activity includes a risk of transmission or contraction of communicable disease, including, but not limited to, COVID-19. I agree to assume this and all known and unknown risks associated with my participation. I hereby release and forever discharge the City, its agents and employees from all real or possible claims for damages or other harm to person or property not attributable to the tortious conduct of City's agents and employees, regardless of the manner by which such claim may be brought. I consent to and authorize first aid, emergency medical care, and/or hospitalization for treatment of injuries or illness that I sustain while or as a result of participating in this activity. I understand that I am solely responsible for any and all expenses that are incurred as a result of any injury or illness incurred while or as a result of participating in this activity. I acknowledge that the activity may be canceled with or without notice to me, due to unforeseen conditions beyond the control of the City, including, but not limited to, public health hazard, governmental order, or act of Gol. I consent to the publication and/or use of any photographs or recordings of me by the City for promotional purposes. I understand that my approval of this agreement means that I cannot later bring a claim against the City, its agents, and/or its employees. I have read, I understand, and I will comply with this activity is subject to these conditions.

PLAYER NAME (Please Print)	PLAYER SIGNATURE	HOME ADDRESS/CITY/ ZIP CODE	EMAIL	AGE	PHONE NUMBER	*SHIRT SIZE	MERIDIAN RESIDENT?
1.							Yes No
2.							Yes No
3.							Yes No
4.							Yes No
5.							Yes No
6.							Yes No
7.							Yes No
8.							Yes No
9.							Yes No
10.							Yes No
11.							Yes No
12.							Yes No

(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IF NECESSARY) * First place teams will receive individual awards. Awards are subject to change.*

Coaches/Team Representative is responsible for turning in a completed <u>Registration form, current season roster form, team fee, and player fees</u> prior to the registration deadline. Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available sports open.

CITY OF MERIDIAN PARKS & RECREATION DEPARTMENT 33 E. BROADWAY, MERIDIAN, ID 83642 208-888-3579 FAX: 208-898-5501



Player fees	are non-transferable	from	player	to pla	yer.

	\			
Coed	Μ	en's	Women's	
-	YEAR:	2024		

TEAM NAME

COACH/MANAGER'S NAME

WAIVER AGREEMENT: I acknowledge that my participation in the above-written activity offered by the City of Meridian presents risks, some of which are unknown. I acknowledge that City's agents and employees will, as reasonable and feasible, follow protocols for preventing the transmission of disease, but I acknowledge that my participation in this activity includes a risk of transmission or contraction of communicable disease, including, but not limited to, COVID-19. I agree to assume this and all known and unknown risks associated with my participation. I hereby release and forever discharge the City, its agents and employees from all real or possible claims for damages or other harm to person or property not attributable to the tortious conduct of City's agents and employees, regardless of the manner by which such claim may be brought. I consent to and authorize first aid, emergency medical care, and/or hospitalization for treatment of injuries or illness that I sustain while or as a result of participating in this activity. I understand that I am solely responsible for any injury or illness incurred while or as a result of participating in this activity. I understand that I am solely responsible for any without notice to me, due to unforeseen conditions beyond the control of the City, including, but not limited to, public health hazard, governmental order, or act of God. I consent to the publication and/or use of any photographs or recordings of me by the City for promotional purposes. I understand that my approval of this agreement means that I cannot later bring a claim against the City, its agents, and your understanding that participation in this activity is subject to these conditions.

PLAYER NAME (Please Print)	PLAYER SIGNATURE	HOME ADDRESS/CITY/ ZIP CODE	EMAIL	AGE	PHONE NUMBER	*SHIRT SIZE	MERIDIAN RESIDENT?
13.							Yes No
14.							Yes No
15.							Yes No
16.							Yes No
17.							Yes No
18.							Yes No
19.							Yes No
20.							Yes No
21.							Yes No
22.							Yes No
23.							Yes No
24.							Yes No

(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IF NECESSARY) * First place teams will receive individual awards. Awards are subject to change.*

Coaches/Team Representative is responsible for turning in a completed <u>Registration form, current season roster form, team fee, and player fees</u> prior to the registration deadline. Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available sports open.