



## Adult Softball Registration Policy

1. All Teams - entire fee is due at the time of registration.
2. All fees to be paid in District Office during regular Business hours (Mon-Thurs 8am-5pm & Fri 8am-noon). Payments can be made to the Athletic Director in the park with prior Arrangements.
3. \$100.00 is non-refundable should your team decide to pull out after the registration deadline. All fees are non-refundable once the schedule is released.

**\*NO EXCEPTIONS**

**\*EMAIL ADDRESS is REQUIRED**

**NO PERSONAL CHECKS(prior approval for business checks)**

**CASH, MONEY ORDER OR CREDIT CARD ONLY**



Beaumont Cherry Valley  
Recreation and Park District

[www.bcvparks.com](http://www.bcvparks.com)

# Adult Slow/ Fast Pitch Softball

## Fall League 2019 Entry Form

**Fall is 8 games plus playoffs**

**All entry forms must be completed and turned in by  
Thursday September 19th, 2019 by 5:00pm**

The following items must be submitted together or entry will not be accepted:

**Team Entry Fee \$425.00\*** (umpire, balls, Winner Tee's or \$10 off next season (12 max)

**Completed entry form** signed by the team manager.

**Roster** 18 person maximum, ages 16 & older by the 3rd week signed  
(under age 18, roster must be signed by a parent)

**\*Refer a new team** (no returning players) & get \$25 off the following season  
(limit to 4 referrals per season)

**BCVRPD Fall League will begin on September 24, 2019  
Managers will be contacted by email or text**

Team Name:	
Sponsors Address (street, city, zip):	
Managers Name (please print):	
Address:	
Phone:	E-Mail <b>Required:</b>
Signature:	
( I the above agree to abide by All BCVRPD Adult Softball Rules, Regulations, and Policies)	

### League and Night Requested (4 team minimum to play)

- Mon Women's     
  Tues Coed     
  Tues Mens /Church  
 Thur Coed  
 Fri Coed     
  Fri Coed Fastpitch     
  Sun.Coed Div 2

Are you willing to play a different night if necessary?     YES     NO

Office Use Only

Payment: _____	Receipt # _____	Date _____
Payment: _____	Receipt # _____	Date _____
Payment: _____	Receipt # _____	Date _____

**Contact:**

Office : (951) 845-9555  
dodie@bcvparks.com

# Add/ Drop Fall 2019

**Due no later than 1/2 way.  
(exception for injury)**

**Beaumont Cherry Valley Recreation & Park District**  
 390 W. Oak Valley Parkway, Beaumont, Ca. 92223  
 Phone (951) 845-9555 Fax (951) 845-9557  
[www.bcvparks.com](http://www.bcvparks.com) [dodie@bcvparks.com](mailto:dodie@bcvparks.com)

<b>Team Name:</b>	<b>Season:</b>	<b>Year:</b>
<b>Manager:</b>	<b>Assistant Mgr:</b>	
<b>Address:</b>	<b>Address:</b>	
<b>Phone:</b>	<b>Cell #:</b>	<b>Phone:</b>
<b>E-Mail:</b>	<b>REQUIRED</b>	<b>E-Mail:</b>
		<b>REQUIRED</b>

**THE FOLLOWING PLAYERS ARE TO BE DROPPED FROM THE ROSTER**

1	
2	
3	
4	
5	

**AGREEMENT, WAIVER AND RELEASE**

In consideration for being permitted by the above district to participate in any Adult Softball teams, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of, or connected in any way with, my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves and element of risk and danger of accidents and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. I have read and agree to abide by the BCVRPD Code of Conduct

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT, AND I SIGN IT OF MY FREE WILL.**

ADDITIONS TO TEAM ROSTER					
	NAME	ADDRESS	CITY	PHONE	SIGNATURE
1					
2					
3					
4					
5					
6					

TO ADD OR DROP MORE THAN 5 PLAYERS USE ADDITIONAL FORM

# Team Roster Fall 2019

**Beaumont Cherry Valley Recreation & Park District**  
 390 W. Oak Valley Parkway, Beaumont, Ca. 92223  
 (951) 845-9555 phone (951) 845-9557 fax  
[www.bcvparks.com](http://www.bcvparks.com) [dodie@bcvparks.com](mailto:dodie@bcvparks.com)

**Due no later than 3rd week,  
 or team could be dropped.**

<b>Team Name:</b>		<b>Assistant Mgr:</b>	
<b>Manager:</b>		<b>Address:</b>	
<b>Address:</b>		<b>Phone:</b>	
<b>Phone:</b>	<b>Cell #:</b>	<b>Cell #:</b>	
<b>E-Mail:</b>	<b>REQUIRED</b>	<b>E-Mail:</b>	<b>REQUIRED</b>

### AGREEMENT, WAIVER AND RELEASE

In consideration for being permitted by the above district to participate in any Adult Softball teams, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of, or connected in any way with, my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. I have read and agree to abide by the BCVRPD Code of Conduct

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT, AND I SIGN IT OF MY FREE WILL.**

	NAME	ADDRESS	CITY	PHONE	SIGNATURE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					

Once the original roster limit has been met you **MUST** use the Add/Drop Off form to add additional players