

San Carlos Parks & Recreation

FALL BOCCIE LEAGUE



REGISTRATION DEADLINE:

AUG 20, 2023

SEASON DATES:

Aug 29, 2023 - Oct 26, 2023*

LOCATION:

-Burton Park Bocce Courts

GAME TIMES:

-6pm & 6:50pm (7:40 if needed)

-8 games guaranteed

LEAGUE FEES:

-\$155 per team

**-Returning teams have priority
registration**



**CITY OF
GOOD
LIVING
SAN CARLOS**



Contact:

Athletics@cityofsancarlos.org

(650).802.4123

Register Online:

www.QuickScores.com/cityofsancarlos

*Game times/Season dates may change based on registrations

CITY OF SAN CARLOS PARKS & RECREATION DEPARTMENT TEAM REGISTRATION FORM

Please indicate which leagues you would consider playing in. Label your priorities with "1" being your first choice, "2" your second choice and so on. Use one entry form for each team entered.

_____ **Tuesday Evening** _____ **Wednesday Evening** _____ **Thursday Evening**

Team Name: _____

Manager's Name: _____

Address: _____ **City:** _____ **Zip:** _____

Phone Number: _____ **Alternative Phone Number:** _____

Manager's Email: _____

Asst. Mgr.(Other Contact): _____

Phone Number: _____ **Alternative Phone Number:** _____

Asst. Mgr. Email: _____

Returning Team? _____ **New Team?** _____

Fees: Please submit one check (written to the City of San Carlos) or Visa/MasterCard

_____ \$155 - per team

Amount Paid by: Cash _____ Check # _____

VISA/MC # _____ Exp. Date: _____

Payee's Name _____

Notes:

San Carlos Parks & Recreation Adult Bocce

I hereby absolve and hold harmless the City of San Carlos, the San Carlos School District (when District facilities are used or a program is co-sponsored), and the Parks and Recreation Foundation of San Carlos, their respective officers, employees, and instructors, from all injuries, (including risk of exposure to COVID-19 or other communicable diseases), claims, or liabilities that may result from my participation in the above activity. If participant is a minor, I give my consent to his/her participation. I am aware the activity may involve risk of injury and assume all risks for injuries received. Participants of virtual recreation classes acknowledge they are responsible for ensuring their environment is safe/free from obstruction and that any use of a third-party application (e.g. Zoom, Google Meet, etc.) at their own risk. Photo/Video Release: I agree to the use of my photograph/video for City and/or Parks & Recreation Foundation publicity.

Team Name:					
Manger's Name:					
League:					
Year & Season:					
	Name	Email	Phone Number	City of Residence	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					