San Carlos Parks & Recreation

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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)

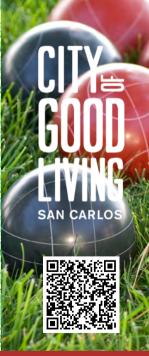
-8 games guaranteed

LEAGUE FEES:

-\$155 per team -Returning teams have priority registration

Contact: Athletics@cityofsancarlos.org (650).802.4123 Register Online: www.QuickScores.com/cityofsancarlos

Game times/Season dates may change based on registrtations



CITY OF SAN CARLOS PARKS & RECREATION DEPARTMENT TEAM REGISTRATION FORM

| Please indicate which leagues you we first choice, "2" your second ch | ould consider playing in. Label you noice and so on. Use one entry forn | | |
|---|--|------------------|--|
| Tuesday Evening | Wednesday Evening | Thursday Evening | |
| eam Name: | | | |
| Manager's Name: | | | |
| Address: | City: | Zip: | |
| hone 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 Visa/MasterCard | (written to the City of San (| Carlos) or | |
| \$155 - per team | | | |
| | 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:

Vear
Season:

Name
Email

Phone Number
City of Residence
Signature

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| Team Name: | | | | |
|----------------|-------|--------------|-------------------|-----------|
| Manger's Name: | | | | |
| League: | | | | |
| Year & Season: | | | | |
| Name | Email | Phone Number | City of Residence | Signature |
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