

# San Carlos Parks & Recreation Fall Softball



CITY OF  
GOOD  
LIVING  
SAN CARLOS

## REGISTRATION

**DEADLINE:** *Aug 27, 2023*

## LOCATIONS:

*All leagues at Burton Park*

## PRICING:

*Mens Softball team - \$600  
Coed softball team - \$500*

## SEASON DATES:

*Sep 10 - Nov 12, 2023  
6 to 8 games guaranteed*

## REGISTER ONLINE:

*[www.QuickScores.com/  
cityofsancarlos](http://www.QuickScores.com/cityofsancarlos)*

## Contact:

*[Athletics@cityofsancarlos.org](mailto:Athletics@cityofsancarlos.org)  
(650).802.4123*

## GAME TIMES:

**MONDAY MEN'S RECREATIONAL:**  
*6:45, 7:45, 8:45*

**FRIDAY MEN'S COMPETITIVE:**  
*6:45, 7:45, 8:45*

**SUNDAY COED:**  
*2:30, 3:30, 4:30, 5:30*



**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.

\_\_\_\_\_ **Men's Recreational** (Mon) Burton  
\_\_\_\_\_ **Men's Competitive** (Fri) Burton

\_\_\_\_\_ **Co-Ed-Recreational** (Sun) Burton

**Team Name:** \_\_\_\_\_

**Manager's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Additional Phone:** \_\_\_\_\_

**Manager's Email:** \_\_\_\_\_

**Asst. Mgr./ (Other Contact):** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Additional Phone:** \_\_\_\_\_

**Asst. Mgr. Email:** \_\_\_\_\_

**Sponsor (if any):** \_\_\_\_\_

**Returning Team?** \_\_\_\_\_ **New Team?** \_\_\_\_\_ **Previous Team Name?** \_\_\_\_\_

**Fees:** Please submit one check written out to the City of San Carlos, exact amount of cash, or Visa/MasterCard

\_\_\_\_\_ \$600 - Men's League

\_\_\_\_\_ \$500 - Co-Ed League

-----  
For Office Use:

Amount Paid by: Cash \_\_\_\_\_ Check # \_\_\_\_\_

VISA/MC # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Payee's Name \_\_\_\_\_

Notes:

## San Carlos Parks & Recreation Adult Softball

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					
13					
14					
15					
16					
17					
18					
19					
20					