MAYOR CAROLINE SIMMONS

DIRECTOR OF PARKS & RECREATION

KEVIN MURRAY

Email: kmurray@stamfordct.gov

ASSISTANT SUPERINTENDENT OF RECREATION MEG GEARHART

Tel: (203) 977-5221 Email: mgearhart@stamfordet.gov

CITY OF STAMFORD

RECREATION SERVICES DIVISION 888 WASHINGTON BOULEVARD, 6th FLOOR STAMFORD, CT 06901 977-5214, fax 977-5504

www.stamfordrecreation.com

RECREATION SUPERVISOR JACK LYONS

Tel: (203) 977-4645 Email: JLyons@StamfordCT.gov

2024 Adult Leagues

Please read all information.

All adult league information can be found here, <u>Leagues | Stamford Parks And R (stamfordrecreation.com)</u>, select which sport you are interested in for more details.

Important dates

Look for registration dates posted. There will be a returning team registration open date and a new team registration open date

The tentative start date will be included too. These are tentative due to facility scheduling conditions. Confirmed start date will be communicated via quickscores once your team has successfully registered for the league.

Team Application

Once registration opens please submit the Application Agreement and Forfeit contract to StamfordRecreationLeagues@stamfordct.gov. Both pages must be complete to hold your league space.

Rosters

Instead of completing the Roster form and emailing it in, like we have done in previous seasons. We would like you, as Team Managers, to please enter your roster directly in QuickScores. You are the only ones who have access to enter the roster so you will need to collect the relevant information from your players to enter into QuickScores.

Once you have submitted your roster, all players will receive an email to sign off on our waiver. This is the same waiver they have signed off on in previous seasons with the paper copy. This must be completed by you and your players to compete in the league.

Please add all the information the roster is asking for.

Full name, Email Address, Cell Phone, Gender.

We do not require Driver's License information on this roster, but players should have it on them at the court to verify them against the rosters you submitted to the League Directors.

^{**}Returning team is defined as a team that has participated in the same league within the past 12 months**

Industrial Teams

All industrial teams must also provide a letter from their employer or HR department verifying all players on the roster are employees of the company team. This must be provided on a company letter head and signed by employer or HR department.

League Fees and Umpire Fees

Once team paperwork has been received your league fee will be added to the team mangers account on community pass. This must be paid to secure your space in the league. Please make sure you are aware of the deadline for payment.

If you do not have a Community Pass account, you can create one here

Stamford Recreation Community Pass

Those that wish to pay by check please mail to Recreation Services, 888 Washington Blvd, Stamford, CT 06901. Your mailed check must arrive by the payment deadline to confirm your team's space in the league.

Umpire/ Referee fees must be paid in cash at the field or court before each of your scheduled games

QuickScores

Stamford Recreation Services - QuickScores.com

All league schedules and communication will be posted here. Team managers will also enter their team rosters here. Please make sure you are checking schedules weekly and read all emails you receive.

Beach Volleyball Application Agreement PLEASE FILL OUT COMPLETELY

_	ned, representing to ion for entry in the	he following league(s):	team, hereby (team	name)
Highlight One:	Monday:	${\sf Intermediate}\big]$		
	Tuesday:	Intermediate	Beginner	
	Wednesday:	Intermediate	Beginner	
	Thursday:	Beginner]		
Fee (Highlight): **Returning team is defined	\$350 Returning teams \$370 New teams If a sa team that has participated in the same league within the past 12 months**			
•	-	e to abide by the rules and the second secon	and regulations as drawn u	p by the
Team:] (Tea	am Manager):[]	
What league did	your team play in l	ast year (Please include last yea	ar's team name & if the manager has chang	;ed)
Address: [Zip: [(If Indust Telephone-Cell N	rial Team, Company Ac	City: [ddress) Email: [] State: [
League fee will be a	dded to the Team mar	nager's family account on C	community Pass: Do you have a	n account? $\left[egin{array}{c} \mathbf{Y} \ \mathbf{N} \end{array}\right]$
Second Contact P	erson:			
Telephone- Cell:] Email:		

Team application and Forfeit contract can be emailed to <u>StamfordRecreationLeagues@stamfordct.gov</u>

Please do not send to or CC Meg or Jack in your email

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FORFEIT CONTRACT

The City of Stamford has a Zero Tolerance Rule for forfeits.

A Forfeit is defined as when a team notifies our office less than 24 hours prior to their game, that they will be forfeiting their game; shows up to the field without enough players to participate or fails to show up to a scheduled game without notice.

If your team forfeits in 2024 you must pay \$25 on the court at your next scheduled game or your team will forfeit their next scheduled game as well.

If a team forfeits twice from the league, they will be permanently removed.

In consideration for playing in the league, I understand that by signing this form that I will be responsible for paying referee fee's if my team forfeits. I understand that if I do not pay the fee that my team will be removed from the league and I, as well as my teammates will be suspended until the forfeit fee is paid.

forfeit fee is paid.		
Managers Name	Team Name	
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