



**CITY OF BLAINE
PARKS AND RECREATION DEPARTMENT**



10801 Town Square Drive NE, Blaine, MN 55449

MEMO

DATE: June 3, 2016
TO: Adult Softball Teams, Managers and Players
FROM: Jerome Krieger, League Director

2016 FALL SOFTBALL LEAGUES

The Blaine Parks and Recreation Department is now forming Men's, Women's and Co-Rec 11/12" Fall Softball Leagues. The following information is for teams interested in joining the League.

<u>League</u>	<u>Nights</u>	<u>Start</u>	<u>Games</u>	<u>Blaine Team Entry Fee</u>	<u>Non-Resident Team Entry Fee</u>
Men's D	M, W, TH	August 8, 10, 11	12	\$625	\$625
Womens D	TH	August 11	12	\$625	\$625
Co-Rec	SUN, TUE	August 7, 9	12	\$645	\$645

All entry fees include officials, awards, administration fee, and softballs. Men's & Co-Rec teams are allowed 3 home runs per game. Double headers will be played. Start dates are tentative.

Registration:

To register a team, please complete the league registration form and submit with entry fee according to the following registration dates:

Returning Summer 2016 City of Blaine Teams start registering on **July 5**.

Returning Fall 2015 City of Blaine Teams start registering on **July 6**.

New Teams start registering **July 7 (if space is available)**.

Last day to register any team is **July 29(if space is available)**.

Team Roster:

Each team is required to submit a completed team roster prior to their first game. Players may be added to the roster until September 5. Roster attached to memo. A copy of the summer roster can be used if the same team is playing in the Fall League.

Softballs: Teams must pick up their game balls from the Parks and Recreation office.

Questions: Please call 763-785-6161 or e-mail at jkrieger@ci.blaine.mn.us

DATA PRIVACY ACT

In accordance with the Minnesota Government Data Practices Act, the Recreation Staff of the City of Blaine hereby informs you that the personal information requested of ;you and/or your players on the roster form is considered private. Private data is available to you and City Staff who require it in performance of their duties, but not to the public. You may choose to withhold this data, however, the City's Recreation Staff may not be able to complete your registration and/or provide you with updated program information such as schedules, revisions or standings.

2016 BLAINE ADULT FALL SOFTBALL LEAGUE REGISTRATION FORM

Form can be scanned or faxed in with credit card information. Fax - 763-785-6191

TEAM NAME: _____

MANAGER'S NAME: _____ CELL PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

E-MAIL ADDRESS: _____

LEAGUE (check): Mens ___ Womens ___ Co-Rec ___

NIGHT (circle): M T W TH LEVEL OF PLAY DESIRED (circle): Competitive Recreational
Discretion will be used by the league director for a team's level of play.

AMT PAID: \$ _____ DATE PAID: _____

PAYMENT METHOD:

Cash: _____ Check # _____ (Checks payable to "City of Blaine")

Visa/MC/Discover# _____ EXP _____

NAME ON CHECK/CREDIT CARD: _____

Signature of Credit Card Holder: _____