Team Registration Form Meridians 2025 Spring/Summer Softball

INSTRUCTIONS: All fields are required to register.

Return the filled-out registration form with your team fee, player fees, and a signed official roster to the Meridian Parks and Recreation Office by: Wednesday, March 12, 2025, by 5 p.m.

Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available spots open. (If paying with two or more forms of payment types and/or multiple payees. Please call beforehand for instructions as payment processes have changed.)

League Fees: (Includes 9 league games, game ball, End of Season Double Elimination Tournament, and Idaho Softball Registration.) Player fees are non-transferable from player to player Meridian Resident Player Fee - \$10 Non-Resident Player Fee - \$20

Team Fees - \$700 per team

Upon registration, each team will be allowed 1.5 hours of free practice time per week if fields are available before the season starts.

Team Name:	Contract March	
Team Manager:	Phone:	
Home Mailing Address:		
City:	State:	Zip:
Email Address:		1
Division desired this year: (Elite is the highest le	evel, Social is the lowest.) PICK	ONLY ONE.
Coed: EliteAdvanced Intermediate Plus	_IntermediateRecreational Plu	sRecreationalSocial
Men's: EliteAdvanced Intermediate Plus	_ Intermediate Recreational Plu	us Recreational Social
Scheduling format: Coed teams play Monday, Men's teams play Tuesday Please give your top two choices: (Times ar	y, Thursday, and Friday <i>re not guaranteed.)</i>	Spots are not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available spots open.
6:15/6:30 p.m 7:30/7:45 Teams you share players with list team name a Last Season; Team Name: City:Division:	ind coaches name (If Necessary)
Ways to Register: Complete the current registration the below steps to complete and secure your team's a deadline with current completed registration form, cur Phone-In - Call 208-888-3579 and pay over the phor and roster form to recreation@meridiancity.org Walk-In - Come into our office at 33 E. Broadway Ave in person with cash, check, or card. Mail-In - Mail your completed registration form and ro 83642. (Must be received by the deadline and still ha	form and current roster form. Once spot in the league. * <i>Sponsorship pa</i> <i>rrent roster form, team fee, and play</i> ne with a card after emailing in both e., Suite 206, with a completed region oster with payment to 33 E. Broadw	e, paperwork is completed follow ayments must be in by the yer fees. the completed registration form istration form and roster and pay

Payment Method (Office Use Only)						
Check #:	Cash:	Credit Card:	_In Person or Phone:			
Date paid:	Amount Paid:	City Receipt Number:_	Received By:			

33 E. BROADWAY	AN ATION DEPARTMENT , MERIDIAN, ID 83642 FAX: 208-898-5501	COACH/MANAGER'S NAME	SPORT: Coed					
HOME ADDRESS		COACH/MANAGER 3 NAME_ CITY	STAT	E	ZIP			
PHONE (H)	(W)	E-MAIL ADDRESS						

WAIVER AGREEMENT: I acknowledge that my participation in the above-written activity offered by the City of Meridian presents risks, some of which are unknown. I agree to assume all known and unknown risks associated with my participation. I hereby release and forever discharge the City, its agents and employees from all real or possible claims for damages or other harm to person or property not attributable to the tortious conduct of City's agents and employees, regardless of the manner by which such claim may be brought. I consent to and authorize first aid, emergency medical care, and/or hospitalization for treatment of injuries or illness that I sustain while or as a result of participating in this activity. I understand that I am solely responsible for any and all expenses that are incurred as a result of any injury or illness incurred while or as a result of participating in this activity. I acknowledge that the activity may be canceled with or without notice to me, due to unforeseen conditions beyond the control of the City. I consent to the publication and/or use of any photographs or recordings of me by the City for promotional purposes. I understand that my approval of this agreement means that I cannot later bring a claim against the City, its agents, and/or its employees. I have read, I understand, and I will comply with this agreement and all applicable rules, policies, and laws.

Your signature below indicates your approval of this agreement and your understanding that participation in this activity is subject to these conditions.

Player fees are non-transferable from player to player.

First place teams will receive individual awards. Awards are subject to change.

PLAYER NAME (Please Print)	PLAYER SIGNATURE	HOME ADDRESS/CITY	ZIP CODE	EMAIL	AGE	PHONE NUMBER	*SHIRT SIZE	MERIDIAN RESIDENT?
1.								Yes No
2.								Yes No
3.								Yes No
4.								Yes No
5.								Yes No
6.								Yes No
7.								Yes No
8.								Yes No
9.								Yes No
10.								Yes No
11.								Yes No
12.								Yes No

(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IF NECESSARY)

Coaches/Team Representative is responsible for turning in a completed <u>Registration form, current season roster form, team fee, and player fees</u> prior to the registration deadline. Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available sports open.

CITY OF MERIDIAN PARKS & RECREATION DEPARTMENT 33 E. BROADWAY, MERIDIAN, ID 83642 208-888-3579 FAX: 208-898-5501



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Coed	Men's	Women's	
Y	EAR: 2025		

TEAM NAME

_COACH/MANAGER'S NAME____

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PLAYER NAME (Please Print)	PLAYER SIGNATURE	HOME ADDRESS/CITY	ZIP CODE	EMAIL	AGE	PHONE NUMBER	*SHIRT SIZE	MERIDIAN RESIDENT?
13.								Yes No
14.								Yes No
15.								Yes No
16.								Yes No
17.								Yes No
18.								Yes No
19.								Yes No
20.								Yes No
21.								Yes No
22.								Yes No
23.								Yes No
24.								Yes No

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