

2016 YORK CITY RECREATION AND PARKS
COORS LIGHT WHITE ROSE SOFTBALL

FALL LEAGUE

TEAM REGISTRATION FORM

MEN'S _____

DATE _____

TEAM NAME _____

MANAGER _____

PHONE (H) _____ (W) _____ (CELL) _____

ADDRESS _____

CITY

ZIP

ASSIST. MANAGER'S NAME _____

PHONE (H) _____ (W) _____ (CELL) _____

TEAM NAME LAST YEAR _____

DIVISION PLAYED LAST YEAR (FALL LEAGUE) _____

DIVISION PLAYED IN SUMMER LEAGUE (IF APPLICABLE) _____

PREFERENCE OF DIVISION PLAY 2015 SEASON (Circle one)
(There is no guarantee you will play in division you prefer)

1
Best

2

3
Lowest

I do hereby agree with my signature to abide by all rules and by-laws of the ASA and the York City Recreation and Parks, Coors Light White Rose Softball League.

Manager's Signature _____ Date _____

ADDRESSES AND PHONE NUMBERS OF BOTH THE MANAGER AND ASSISTANT MANAGER
MUST BE FILLED IN ON THE FORM!

OFFICE USE ONLY

ENTRY FEE: \$390 plus \$25 ASA fee (separate payment) and \$10.00 additional fee due for each non-city resident on roster

DATE PAID: _____

CHECK NUMBER: _____ () CHECK IF PAYMENT MADE BY CASH

ASA CHECK NUMBER: _____

RECEIPT NUMBER: _____

INITIALS: _____

COORS LIGHT WHITE ROSE FALL SOFTBALL LEAGUE TEAM NAME _____

PLAYERS AGREEMENT – 2016

I do agree to play softball for the above club with no compensation or article of value for my services and that I will play in accordance with all ASA playing rules and/or by-laws of the league during the 2016 season. I understand that by signing this contract I have committed myself to play for no other team during the 2016 season.

I further promise to return all team or league property placed in my custody or loaned for use, on demand, or on being released from the above mentioned club.

I further agree to return my uniform to the manager within 30 days after the season ends. If my uniform is not returned, I will not be permitted to play for any other team for one year.

I do further release and hold harmless the City of York, Coors Light and any of its officers and employees from any and all claims and causes of action for personal injury arising or growing out of the activities of the undersigned involving or indirectly related to the activities of the Coors Light White Rose Softball League.

I further agree to indemnify and hold the City and Coors Light harmless from any and all injuries, damages, causes of action or claims asserted by third persons against the City of York. The indemnification shall include costs of suits or other costs associated with defending a claim including reasonable attorney fees.

√ **ONE**
City Non-City
Resident Resident

1. Name (print) _____ Signature _____ I played for (Team Name) 2015 _____ 2014 _____ 2013 _____		
2. Name (print) _____ Signature _____ I played for (Team Name) 2015 _____ 2014 _____ 2013 _____		
3. Name (print) _____ Signature _____ I played for (Team Name) 2015 _____ 2014 _____ 2013 _____		
4. Name (print) _____ Signature _____ I played for (Team Name) 2015 _____ 2014 _____ 2013 _____		

TEAM NAME _____

√ ONE

City Resident Non-City Resident

12. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

13. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

14. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

15. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

16. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

17. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

18. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

TEAM NAME _____

✓ **ONE**

City Resident Non-City Resident

19. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

20. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

21. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

22. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

23. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

24. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____

25. Name (print) _____ Signature _____

I played for (Team Name)

2015 _____

2014 _____

2013 _____