ADULT SPORTS

ASL

LAKEWOOD

SPRING ADULT KICKBALL

CITY OF LAKEWOOD RECREATION & COMMUNITY SERVICES

Kickball

LAKEWOOD

REGISTRATION JANUARY 9-20, 2017

LEAGUES BEGIN THE WEEK OF FEBRUARY 19

***CUSTOM PRIZES**

***QUALITY OFFICIATING**

***NO GAME DAY FEES REQUIRED**

WE ACCEPT ALL MAJOR CREDIT CARDS

CITY OF LAKEWOOD RECREATION & COMMUNITY SERVICES

LAKEWOOD SPORTSTOWN Sports Illustrated's No.1 in California

Visit www.lakewoodcity.org/sports for more information

Adult Kickball Program – Spring 2017
Registration and League Information

The City of Lakewood, Department of Recreation and Community Services will organize adult kickball leagues for the Spring season in each of the following programs:

Co-Ed & Women's

QUALIFICATION INFORMATION:

All teams will be categorized for the purpose of determining priority registration according to the following criteria:

Category A
Lakewood Resident Teams – Must maintain no fewer than eight Lakewood residents on the roster at all times. Proof of residency will be required for each Lakewood resident. Photocopies of a valid driver's license, DMV identification, or utility bill dated within the past 30 days, along with valid identification, for all Lakewood residents must be submitted with registration. An extended driver's license must include a copy of the extension. Previously submitted verification must be resubmitted.

Category B
Lakewood Sponsored Teams – Must be sponsored by a bona fide Lakewood business or community organization. Teams sponsored by a Lakewood business or community organization will require verification from the sponsor in writing, along with the number of a valid Lakewood business license or complete name and address of the community organization. Please use the Adult Sports Statement of Sponsorship form found on page 4.

Category C
Non-resident/Non-sponsored Teams - Teams not meeting the requirements in the above two categories.

NOTE: We regret that we are unable to make photocopies for you. A copying machine for public use is located at the Iacoboni Library, south of City Hall.

LEAGUE INFORMATION:

Format may be changed depending on number of registered teams for all leagues.

- **SUNDAY AFTERNOON CO-ED & WOMEN'S KICKBALL** - Games will be played Sunday afternoons. Each team will tentatively play ten league games + playoffs between February 19 – May 7 (No games on April 16). Games are scheduled for 2:00, 3:00 and 4:00 p.m. with a 60-minute time limit.

- **TUESDAY EVENING CO-ED AND WOMEN'S KICKBALL** - Games will be played Tuesday evenings. Each team will tentatively play ten league games + playoffs between February 21 – May 2. Games are scheduled for 6:30, 7:30 and 8:30 p.m. with a 60-minute time limit.

- **SATURDAY AFTERNOON CO-ED & WOMEN'S KICKBALL** - Games will be played Saturday afternoons. Each team will tentatively play ten league games between February 25- May 20 (No games on April 15, May 13). Games are scheduled for 2:00, 3:00 and 4:00 p.m. with a 60-minute time limit.

REGISTRATION DATES:

A. Lakewood resident and Lakewood sponsored teams may register beginning Monday, January 9, 2017. All properly registered teams accepted prior to 4:00 p.m. Friday, January 20, 2017, will be guaranteed berths.

B. Registration will begin for Non-resident/Non-sponsored Lakewood teams and continue for Lakewood resident and Lakewood sponsored teams Tuesday, January 17, 2017, at the Recreation Office on a first-come, first-served basis until the league fills, or until Friday, January 20, 2017.

REGISTRATION PROCEDURE:

To register, each team must submit the following:

1. Official **Spring 2017** Roster & Player Waiver form (page 6) with name, complete address, phone number, and **signature** of each team member. Once an accurate roster including name, address and phone number has been submitted, any players who were unable to sign the original roster at the time of our registration, may do so at the first game. Players to be added at subsequent games may sign our roster addition forms
2. Spring 2017 Kickball Registration Questionnaire (page 5).
3. Fee: Cash, credit/debit card, or one check for entire amount made payable to "City of Lakewood."
4. Proof of residency, if applicable.
5. Proof of sponsorship, if applicable (Adult Sports Statement of Sponsorship form – page 4).

Registration may be brought to or mailed to Department of Recreation and Community Services, 5050 Clark Avenue, Lakewood, CA 90712. Walk-in registration will be accepted Monday through Thursday, 7:30 a.m. to 5:00 p.m. and working Fridays, 7:30 a.m. – 4:30 p.m.

Mail-in registration will be processed at the conclusion of the first day of eligibility after which it is received. See "Registration Dates" above. If you decide to mail-in your registration, please call the Recreation Department (562) 866-9771, ext. 2408 to confirm we have received your registration.

ROSTERS:

Each player must sign the Official Roster and Waiver form as a waiver for eligibility to play in the program. **Forged signatures will lead to your team's dismissal from the league.** Rosters must include complete name, address and phone number of all players. **INCOMPLETE ROSTERS WILL NOT BE ACCEPTED**.

All rosters are limited to a maximum of 16 players and minimum of 10 players.

Players must be at least 16 years of age. All minors must have a waiver signed by the parent or legal guardian. Waiver forms are available on our website or in the Recreation Department at City Hall.

ROSTER CHANGES:

Managers are advised to submit full rosters at the time of registration. The team will be limited to changes as follows:

1) Each team will be allowed **five** players to be added during the season.
2) If a team needs to add more players, a $10.00 administrative fee will be charged for each additional player. (Changes **must** be made on official forms, which will be provided.)

NOTE: If a player's signature does **not** appear on the roster, that player is **not** a rostered player. To add the player to the roster will require the roster change form, with the proper signature, and will count as an addition as it applies to the limits described above. **Managers may submit roster addition forms to the umpire/scorekeeper prior to a game for a player to be eligible for participation.**

Due to the above rules, it is strongly recommended that much care be taken in submitting the original roster.

REGISTRATION FEES:

The following registration fees are in effect for the teams classified in either Category **A, B** or **C**:

Category A, Lakewood Resident Teams:
Tuesday Co-Ed & Women's (10 games + playoffs) $300
Sunday Co-Ed & Women's (10 games + playoffs) $270
Saturday Co-Ed & Women's (10 games + playoffs) $270

Category B, Lakewood Sponsored Teams:
Tuesday Co-Ed & Women's (10 games + playoffs) $300
Sunday Co-Ed & Women's (10 games + playoffs) $270
Saturday Co-Ed & Women's (10 games + playoffs) $270

Category C, Non-Resident/Non-Sponsored Teams:
Tuesday Co-Ed & Women's (10 games + playoffs) $350
Sunday Co-Ed & Women's (10 games + playoffs) $310
Saturday Co-Ed & Women's (10 games + playoffs) $310

REFUNDS:

Request for refunds must be made prior to January 30. Refund checks will be mailed within three weeks following the request. A $25 administrative fee will be charged to process any refund requests. A full refund will be given in the event the league is cancelled by the City prior to the starting date.

SCHEDULES:

Every effort will be made to schedule each team in the proper classification on its preferred night. However, it may be necessary to reclassify your team to a league on a different night due to registration numbers. **Teams playing in programs other than the Lakewood league must understand the potential conflict.**

Games cancelled due to inclement weather will only be rescheduled if time permits before the start of the Summer season. NO REFUNDS.

PRIZE FORMAT:

The following tiered prize format was effective starting Spring 2015. Teams will start over once the 5th championship has been won. League championships are specific to each league, teams playing in multiple leagues cannot combine championships.

# OF LEAGUE CHAMPIONSHIPS	PRIZE TO WIN
1st	Custom Team T-Shirt
2nd	Custom Team Long Sleeved T-Shirt
3rd	Custom Team DryFit Shirt
4th	Custom Team Hooded Sweatshirt
5th	Custom Team DryFit Jersey

- In leagues with a playoff format, 2nd place finishers will receive a custom team WHITE t-shirt.
- Teams may substitute a lower prize if they do not want the designated prize.

CITY OF LAKEWOOD RECREATION & COMMUNITY SERVICES

ADULT SPORTS
STATEMENT OF SPONSORSHIP

Dear Recreation Supervisor:

Please acknowledge the sponsorship of the below-named team by this Lakewood business or organization.

_____ _____
Business or Organization **Lakewood Business License Number**

ADDRESS: _____ _____
Street Number Street Name

_____ _____
City Zip Code

PHONE: ( ) - _____

SIGNED: _____ **DATE:** _____

PRINT NAME:_____

TITLE: _____

****

TEAM NAME:_____

MANAGER: _____

SPRING 2017 KICKBALL REGISTRATION QUESTIONNAIRE

_____
Team Name

I. SCHEDULES:

Please indicate the day/night you would prefer to play:

CO-ED: ☐ Sunday Afternoon ☐ Tuesday Nights

WOMEN'S: ☐ Sunday Afternoon ☐ Tuesday Nights

II. CLASSIFICATION:

Indicate the classification in which you feel your team will be most competitive:

Most competitive ←——————————————→ Least competitive

___A/B ___C Major ___C Minor ___D Major ___D Minor

III. MANAGER INFORMATION:

Please provide E-Mail Address for City of Lakewood's Use Only_____

☐ I do not have access to an e-mail address

The Department of Recreation and Community Services receives many inquiries from players wishing to join adult kickball teams. If you would like your name, phone number and e-mail address released as being a manager to an inquiring player, please indicate below. If you prefer, you may choose for us not to release your contact information.

__**Yes**, my name, phone number and e-mail (address above) may be released to prospective players.

Name:_____ Phone:_____

___

__**No**, do not release my name, phone number or e-mail information to prospective players.

_____
Manager's Signature

CITY OF LAKEWOOD RECREATION & COMMUNITY SERVICES

OFFICIAL ROSTER & PLAYER WAIVER - Spring 2017
ADULT KICKBALL

Team Name:_____

For Official Use:
$_____ Date: _____ Initials:____
League: _____ No. ____

*Type or print clearly, the name of each player in the first column. Each player must personally sign in the second column. PHOTO COPIES NOT ACCEPTED.

IMPORTANT: READ BEFORE SIGNING:
I, the undersigned, fully understand that my participation in the city activity(ies), (hereinafter "kickball") exposes me to the risk of property damage, personal injury or death. I hereby acknowledge my voluntary participation in kickball and agree to assume any such risk. I hereby release, discharge and agree not to sue the City of Lakewood its officers, employees and agents for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in kickball from whatever cause, including the active or passive negligence of the City of Lakewood, its officers, employees and agents or any other participants in kickball. The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence," as the term is used in applicable case law and/or statutory provision. In consideration for being permitted to participate in kickball, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the City of Lakewood, its officers, employees and agents from any and all claims, demands, actions, or suits arising out of or in connection with my participation in kickball. I also understand that from time to time City representatives may photograph and videotape City recreation programs and participants. By signing this form, I authorize the City to use or publish any images taken by the City showing my participation. I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

***KO-REC ROSTERS:** *Check box for each female player.* **FAST PITCH ROSTERS:** *Check box for each pitcher.*

PLAYER'S NAME (PLEASE PRINT)	PLAYER'S SIGNATURE	ADDRESS (PLEASE PRINT)	CITY & ZIP CODE (PLEASE PRINT)	PHONE # (PLEASE PRINT)
☐ 1.				
☐ 2.				
☐ 3.				
☐ 4.				
☐ 5.				
☐ 6.				
☐ 7.				
☐ 8.				
☐ 9.				
☐ 10.				
☐ 11.				
☐ 12.				
☐ 13.				
☐ 14.				
☐ 15.				
☐ 16.				

I understand all roster provisions including the restriction which limits making additions. I hereby verify that all information above is accurate and that all signatures are authentic and representative of the person described. PLEASE PRINT NAME and SIGN.

Manager's Name (please print)	Signature	Date	email address
Assistant Manager's Name (please print)	Signature	Date	email address