



SOFTBALL - TOWN OF DANVILLE

OFFICIAL TEAM ROSTER AN MANAGER'S CONTRACT



For Office Use Only

Resident  Non-Resident

Date/Time Received: \_\_\_\_\_

League Fees: \$525 + NR \_\_\_\_\_

Check # \_\_\_\_\_

Credit Card

Cash

Season:  Spring  Summer  Fall

Select your preferred league night (1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choices: Mon, Tues, & Thu):

1st Choice:  Men's 18+ Mon.  Men's 40+ Tue.  Coed 18+ Wed\*  Men's 18+ Thu.

2nd Choice:  Men's 18+ Mon.  Men's 40+ Tue.  Coed 18+ Wed\*  Men's 18+ Thu.

3rd Choice:  Men's 18+ Mon.  Men's 40+ Tue.  Coed 18+ Wed\*  Men's 18+ Thu.

**\*Rosters for Coed League must have at least five (5) registered female players.**

Team Name: \_\_\_\_\_

**MANAGER INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Manager's Agreement:** I hereby request placement of the above-named team in the Town of Danville's Adult Softball League Program for the selected season and day. I further agree that all participants on this team will follow and obey all items included in the Town of Danville's Adult Softball Rules and Regulations Handbook. I understand and accept responsibility for my team's actions on Town of Danville property, and understand any action taken by the League Coordinator for player's misconduct. I further understand that any misconduct by any team player(s) could result in dismissal from this Adult Sports League program, and forfeiture of all fees paid. I recognize this is a recreation league and ensure the highest code of sportsmanship is maintained.

I hereby certify that the information provided in this form is correct, and agree to the responsibilities as the Team Manager.

Team Manger's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Team Name: \_\_\_\_\_

**\*\*Rosters for Coed League must have at least five (5) registered female players.**

1. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
2. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
3. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
4. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
5. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
6. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
7. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
8. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
9. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
10. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone

Team Name: \_\_\_\_\_

**\*\*Rosters for Coed League must have at least five (5) registered female players.**

11. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
12. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
13. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
14. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
15. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
16. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
17. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone
18. Print Name	<b>Email</b>		Cell Phone
Address	City/Zip	Birth Date	Work Phone