

**Play**  
**SANTA ROSA SPORTS**

**FALL SOFTBALL 2017**

League Play: *September 11 - October 20*

**\$325** for Men's & Coed

Leagues will play a 5-game, 6-team Round Robin season Mon-Fri  
at Northwest Community Park: Field #1, Field #2 or Field #3.

**Register: 12pm-7pm, August 16 - 17 (Deadline)**

To register bring *completed* **Team Registration Form**  
and \$325 Cash, Check, Visa or MasterCard to:

**Steele Lane Community Center**  
**415 Steele Lane, Santa Rosa**

**Mandatory Fall Managers Meeting Thursday September 7th**

**All Managers or Team Representatives must be present and sign off on being at the meeting.**  
**At the conclusion of the meeting managers will receive schedules and be eligible for 2017 Fall play.**

6:30pm Men's / 7:30pm Coed, held at Steele Lane Community Center.

Registration forms and information at: [srcity.org/sports](http://srcity.org/sports)

Play Santa Rosa Sports Message Hotline: **543-4317**

E-Mail: [softball@srcity.org](mailto:softball@srcity.org)





## 2017 FALL ADULT SOFTBALL REGISTRATION INFORMATION

Play Santa Rosa Sports is excited to introduce a revamped Fall Adult Softball League for 2017. This year's Fall's Softball League will feature a 5-game regular season plus playoffs with 6 teams per league. We offer Men's and Coed Leagues that run Monday through Friday at North West Community Park only. The league will start the week of September 11 and playoffs will take place the week of October 16th subject to change due to weather.

There is a flat team fee of **\$325** for all leagues.

### Team Registration Information:

To register your team for the 2017 Fall season you must complete a Softball Team Registration Form which can be downloaded at [srcity.org/sports](http://srcity.org/sports). This form will have you state your team's name, approximate team skill level, preferred night of play and Manager contact information. Once this form is **completely** filled out you can return it to the Steele Lane Community Center (415 Steele Lane) from 12pm to 7pm, Aug. 16-17. After paying your Team Registration Fee you will receive your **Softball Team Roster Form**. This legal document will list your team's eligible players' information for the 2017 season. Upon completion of this form you may return it on or before the date of your league's **Mandatory Managers Meeting (Steele Lane Community Center)**.

### League Information:

Our leagues will feature a 5-game regular season, with one additional week for playoffs. Teams will play on the same night each week with no byes. Playoffs will be a one-night playoff featuring the top 4 teams of each league. The deadline to make roster changes will be September 29. To ensure player safety we will enforce a legal bat list on all fields. The winner of regular season league play will receive 15 championship t-shirts. All teams are required to have **same color jerseys with numbers on the back by their first game**.

### Fields of Play for Fall Ball:

	Howarth	Galvin	Franklin	NWCP #1	NWCP #2	NWCP #3
Men's				•	•	•
Coed				•	•	•

### IMPORTANT DATES

**Aug 16:** Registration 12pm-7pm

**Aug 17:** Registration **Deadline 12pm- 7pm**

**Sep 7:** **Mandatory** Manager's Meeting - Men's(6:30pm)

**Sep 7:** **Mandatory** Manager's Meeting - Coed (7:30pm)

**Sep 11:** Fall Play Begins

**Sep 29:** Last Day for Roster Adds

**Oct 16:** Playoffs Begin

**Nov 30:** All Softball Fields Closed



## SANTA ROSA SPORTS

# 2017 FALL SOFTBALL TEAM REGISTRATION FORM

### Team Information

**New or Returning Team:**  New  Returning

(Returning Teams are teams that played in the 2016 Fall League.)

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

**League:**  Men's  Coed

**Rate Your Overall Team Skill Level:**  1  2  3  4  5

( 1 - No experience, 2 - Beginner, 3 - Intermediate, 4 - Experienced, 5 - Advanced )

**Preferred Night of Play:**  Mon  Tue  Wed  Thu  Fri

(New teams: Choose 3 nights in order of preference using 1, 2, 3)

(Returning Teams: We try our best to honor night of play, but no guarantee of field and division)

### Manager Information

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

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

#### Sports Desk use only

Received By: \_\_\_\_\_

Date: \_\_\_\_\_

Receipt #: \_\_\_\_\_

#### Payment Information

*Please make checks payable to SRRP*

Cash  Check  Visa  MasterCard

CC#: \_\_\_\_\_

Exp. Date: \_\_\_/\_\_\_