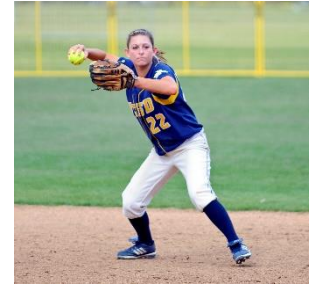




# Adult Softball 2024 Team Registration

City of Beavercreek  
Parks, Recreation & Culture  
789 Orchard Lane, Beavercreek, OH 45434  
[www.beavercreekohio.gov](http://www.beavercreekohio.gov)  
937-427-5514



**Registration:** In person or by mail with payment of cash or check. Check should be made payable to *City of Beavercreek*. Over the phone or on the internet with payment of credit card.

**Leagues:**

<u>Day</u>	<u>Time</u>	<u>Category</u>	<u>Day</u>	<u>Time</u>	<u>Category</u>
Monday	6:10pm	Men's D	Wednesday	6:10pm	Women's
Monday	7:20pm	Men's D	Wednesday	7:20pm	Women's
Monday *	8:30/9:40pm	Men's D	Thursday	6:10pm	Co-Ed
Tuesday	6:10pm	Co-Ed	Thursday	7:20pm	Co-Ed
Tuesday	7:20pm	Co-Ed	Friday	6:10pm	Men's D
Tuesday *	8:30/9:40pm	Men's D	Friday	7:20pm	Men's D



**Roster:** All players must be 18 years of age or older. Players may only play on one team per league.

**Sanctioning:** Adult softball league sanctioned through WSL. Find out more at [playwsl.com](http://playwsl.com)

**Rules:** Game play will follow WSL rules and Rotary Park rules.

**Fees:** League fees are due at the time of registration and include WSL sanctioning.

- \$535 per team, per league
- \$550 under the lights (8:30/9:40 leagues)\*
- \$510 each additional league with the same team name and same roster
- \$100 deposit will hold a spot in a league, with balance due by April 12
- Letter of intent will be accepted for those teams with a sponsor

*Teams that are being sponsored by a company may submit a letter of intent to reserve a spot in their desired league. This letter must be on the company's letterhead, with the following information listed: intended league (including night, time and category), manager's name, address and phone number and league fee. Full payment will be due April 12.)*



**Season:** 14 weeks beginning May 13; additional weeks for holiday and rainout makeups

**NEW in 2024:** Two, 14-week Women's leagues offered in 2024 on Wednesday nights

**Managers Meeting:** TUESDAY, April 23 at 5:30pm VIRTUALLY (Link to join will be emailed to managers prior to the meeting)

Team Name \_\_\_\_\_ Day: M T W TH FRI

Manager's Name \_\_\_\_\_ Time: 6:10 7:20 8:30/9:40

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Cell (text alerts): \_\_\_\_\_ Carrier \_\_\_\_\_ Email \_\_\_\_\_

- ( ) New Team
- ( ) Returning Team - Same League as Last Year
- ( ) Returning Team - Different League from Last Year

Receipt _____	Date _____
Amount _____	Revised 1/4/2024
**Office Use Only**	