Adult Pickle Ball League 2024

# **Registration Dates**

Monday, Nov 13 - Friday, Dec 15, 2023 Monday-Friday; 8:00 a.m. - 4:30 p.m. First-come, first served; limited 12 teams.

## **Registration Fees**

Team - \$45 (Two Player Team) Substitute Players - \$30 per sub (No limit)

## **Registration Location**

Racine Parks, Recreation & Cultural Services 800 Center St., #127 (262) 636-9131

# **Eligibility**

Must be 16 years or older as of Jan. 1, 2024. One team per player per league.

## **Registration Requirements**

Teams must submit:

- Team player cards properly completed and signed.
- (See reverse side)
- All applicable fees.
- Cash, MasterCard/Visa, or checks payable to City of Racine PRCS in the exact amount. (Returned checks will incur a \$50 charge.)

TOP PORTION TO REGISTRANT

# RACINE PARKS, RECREATION & CULTURAL SERVICES

# Adult Wednesday Night Doubles Pickle Ball League

TEAM PLAYER REGISTRATION CARDS: Complete and submit with payment to PRCS office at 800 Center St., #127.

	of registration for pleted in order f		NameAddress		Last Name	Zip Code
player to be eligible to participate.			Home Phone	Work Phone	Cell Pho	ne
(			Date of Birth	Email		
			Player Signature		Date	2
	MANAGER			18 years, parent /g	uardian signature	e is needed.****
Name	Last	Name	Name		Last Name	
Address	City	Zip Code	Address		City	Zip Code
Home Phone	Work Phone	Cell Phone	Home Phone	Work Phone	Cell Pho	ne
Date of Birth	Email		Date of Birth	Email		
Player Signature		Date	Player Signature		Date	2
STAFF ONLY: Team ID #		Total Cost	# Players	Checked Cash (	○ C.C. ○ Ck#	Initials

#### **Team Information**

- Teams must furnish their own paddles.
- Teams will officiate their own matches.
- Schedules & Rules will be sent to Team Managers only.
- Play begins Wednesday , January 3, 2024. Games played at Tyler Domer Center played at 6:15, 7:05, 7:55 p.m.

## Postponements & Forfeits

- No postponements will be made.
- A match must be played on the scheduled date.
- Forfeited games will incur a \$25 fee. Fee must be paid
- before the next scheduled match in order to continue play.

#### Substitute Players

- Any number of substitute players may be added at any time.
- Subs may not play for any other team in same league.
- Substitute player registrations and fees (\$25) must be on file with
- PRCS before being eligible to play.

## Manager Responsibility

 Managers are responsible for knowing the rules regarding <u>Eligibility</u>, <u>Registration</u>, <u>Forfeits</u>, Protest, Subs and Conduct of Team Players.

- Rules may be found in the PRCS Rule document that will be sent with your roster and schedule. Ignorance of the rules is not an excuse.

#### cityofracine.org/ParksRec/



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## **RELEASE OF LIABILITY**

The undersigned acknowledges that participation is not related to, arising from, or incidental to employment with the City for any purpose, and further hereby agree(s) to indemnify, defend and hold harmless the City of Racine, its departments, elected officials, officers, agents, employees and volunteers for any costs (without limit), damages, expenses or liability for personal injuries, bodily injuries, death, property damage or theft of personal belongings sustained by the undersigned: 1) arising out of the undersigned's participation in the team sport activities; 2) arising out of the acts or omissions of third-parties; 3) arising out of the acts or omissions of City of Racine; and 4) without regard to whose negligence caused the costs, damages, expenses or liability.

It is understood that the undersigned may be exposed to: 1) adverse weather conditions and is solely responsible for appropriate clothing; 2) regulation and non-regulation balls and equipment or devices that may be hazardous when handled by careless or inexperienced persons; 3) competitive/aggressive players and body contact between players that may or may not be within the rules of conduct of the sport; 4) moving balls, equipment and devices resulting in eye injuries, facial injuries, bruises, broken bones, muscular sprains and strains, and stress to the nervous system, skeletal system, circulatory system and respiratory system; and 5) name calling and abuse from fans/spectators, other players and coaches; and 6) facilities, vehicles, equipment and devices that are subject to "wear and tear" malfunctions or design problems.

It is further understood that this sport is not monitored or controlled by professionals; balls, equipment and devices used in this sport or objects thrown by spectators may cause injuries to participants; and some activities carry inherent risk of bodily injuries, death or property damage. I acknowledge that it is recommended that I consult a healthcare professional before starting this, or any, sports program. Participation in this sport or any activity is at the undersigned's own risk.

My concerns, conflicts or disagreements with the terms of this Release have been addressed to the Director of the Parks Dept before signing this Release. No terms or conditions are applicable that do not appear on this form.

I have read this release and waiver of liability, fully understanding its terms, and understand that I have given up substantial rights by signing it. I realize I am not required to sign the Release. I freely choose either Option A or Option B:

A. Pay an extra \$500, and not sign the Release

B. Pay nothing extra, and sign the Release of my own free will

#### **USE OF IMAGES & LIKENESS**

The undersigned, an adult resident of the State of Wisconsin, hereby agrees that the City of Racine, its departments, officers, agents, and employees may take and use photographs of myself, or my minor children, during my visits to a Parks Department facility.

I hereby acknowledge that the City will use any and all photographs for promotional purposes, and that I shall not receive any monetary compensation or other consideration in exchange for the use of said photographs. Further, I acknowledge that all photographs are the property of the City of Racine.

Print Name			Print Name			Print Name			
Select Liability Option:	A	В	Select Liability Option:	A	В	Select Liability Option:	Δ	B	
Signature			Signature			Signature			
Date			Date			Date			