

# Adult Pickle Ball League 2025

## Registration Dates

Monday, Nov 11 - Friday, Dec 13, 2024  
 Monday-Friday; 8:00 a.m. - 4:30 p.m.  
 First-come, first served; limited 12 teams.

## Registration Location

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

## 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.)

## Registration Fees

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

## Eligibility

Must be 16 years or older as of Jan. 1, 2025.  
 One team per player per league.

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.

**Competitive**

**Recreation**

\*Depending on team enrollment



TEAM NAME \_\_\_\_\_

### MANAGER

Name _____	Last Name _____
Address _____	City _____ Zip Code _____
Home Phone _____	Work Phone _____ Cell Phone _____
Date of Birth _____	Email _____
Player Signature _____	Date _____

First _____	Last Name _____
Address _____	City _____ Zip Code _____
Home Phone _____	Work Phone _____ Cell Phone _____
Date of Birth _____	Email _____
Player Signature _____	Date _____

\*\*\*\*If under 18 years, parent /guardian signature is needed.\*\*\*\*

Name _____	Last Name _____
Address _____	City _____ Zip Code _____
Home Phone _____	Work Phone _____ Cell Phone _____
Date of Birth _____	Email _____
Player Signature _____	Date _____

STAFF ONLY: Team ID # \_\_\_\_\_

Total Cost \_\_\_\_\_ # Players \_\_\_\_\_  Signatures 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 8, 2025. Games played at Tyler Domer Center played at 6:00, 6:45, 7:30, 8:15p.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.

**Manager Responsibility**

- Managers are responsible for knowing the rules regarding Eligibility, Registration, Forfeits, 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.

**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 (\$30) must be on file with PRCS before being eligible to play.

cityofracine.org/ParksRec/



**TOP PORTION TO REGISTRANT**

**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 \_\_\_\_\_

Select Liability Option:  A  B

Select Image/Likeness Option:  Accept  Decline

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Select Liability Option:  A  B

Select Image/Likeness Option:  Accept  Decline

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Select Liability Option:  A  B

Select Image/Likeness Option:  Accept  Decline

Signature \_\_\_\_\_

Date \_\_\_\_\_