

## **BYRON TOWNSHIP RECREATION**

## **2025 Spring/Summer Adult Slow Pitch Softball**



Team Name:									
Manager's N	Name:		Date of Birth:						
Address:		City:	Zip:						
(Day) Phone:			Email:						
Asst: Manager's Name:			Email:						
Please indicate your first (1) and second (2) choice for league play. Every effort will be made to place you in the night of your									
request.	<u>Night</u>	<u>Type</u>	Choice #						
	Monday	Men's							
	Monday	Coed							
	Tuesday	Men's							
	Tuesday	Coed							
	Wednesday	Men's							
	Wednesday	Coed							
	Thursday	Men's							
	Thursday	Coed							

**REGISTRATION FEE:** \$490 per team +\$7.00 convenience fee when paying with a card (\$497.00)

**REGISTRATION BEGINS:** Monday - February 3, 2025 (First come, first serve basis)

**REGISTRATION DEADLINE**: Friday - March 22, 2025 There is limited space, spots will not be held and we will not accept late registrations, so make sure you sign up as soon as possible to ensure a spot.

TO REGISTER: Mail-in, email, or drop off completed <u>registration form & full registration fee</u> to the Byron Township Recreation Department (2120 76th Street, Byron Center, MI 49315.)
\*If mailing registration - please be sure to allow for the delay, we will not accept late registrations even if you mailed in before the deadline. Once received we will process and email you a copy of your receipt.

GAMES WILL BEGIN: The week of April 21, 2025 10 games + post season tournament GAME TIMES: 6:15pm, 7:15pm, 8:15pm ROSTERS ARE DUE: May 22, 2025

Phone: 616-878-1998 | Email: marty@byrontownship.org

Website: www.byrontownshiprec.org/softball

PLEASE FILL IN ALL THE INFORMATION	BELOW COMPLETELY:								
Indicate if this is a Returning or New Team:	Returning Team	am New Team							
*If returning, list your team name(s):	Summer team 2024: Fall team 2024:								
Please rank your team's ability on a scale of the following areas and then provide a short				3 = below avera	age) in				
Hitting (including home run power ar	nd extra base potential)	1	2	3					
Defense (infield and outfield)		1	2	3					
Speed (offense and defense)		1	2	3					
Overall Ranking		1	2	3					
What is the average age of your team: How long has your team been playing together:									
NOTES: Please use this space to make req									
NO MANAGERS QUIZ: The manager is responsible Rules will be emailed out to the manager.	MANAGER'S QUIZ:  le for both KNOWING the rules a	and COM	MUNICA	ATING the rules to t	heir team.				
Statement of Acknowledgement: I agree to play by the rules, regulations, poliment. Summer Adult Slow Pitch or Fast Pitch all my players of the rules, regulations, policiold or older.	ch Softbalİ Program. I also a	gree to	take the	e responsibility to	inform				
Manager's or Team Representative's Name	Printed Manager	's or Te	am Rep	oresentative's Si	gnature				
Credit Card#:Expiration Date:									
Name on card:CCV:									
OFFICE USE ONLY: Cash:Check:Date Paid:	Amount Paid:	Rec	eipt #:						

Marty Burgess | marty@byrontownship.org | 616-878-1998 byrontownshiprec.org/softball | 2120 76th St. SW. Byron Center, MI 49315