



**PIERCE COUNTY PARKS & RECREATION**  
 9112 Lakewood Dr. S.W.  
 Lakewood, WA 98499-3998  
 (253)798-4177 FAX: (253)582-7461

**LEAGUE APPLICATION**  
**SPRING/SUMMER**

PLEASE CIRCLE ONE SPORT / LEAGUE			
ADULT SUMMER SLOWPITCH			PICK A NIGHT TO PLAY ON
<b>MEN'S</b> <ul style="list-style-type: none"> <li>▪ Aaron Pointer (DH-Thur.)</li> <li>▪ USSSA Class "D"</li> <li>▪ USSSA Class "E"</li> <li>▪ USSSA Class "E-Rec"</li> <li>▪ Church</li> <li>▪ ½ Century Plus 55+</li> </ul>	<b>WOMEN'S</b> <ul style="list-style-type: none"> <li>▪ USSSA Class "D"</li> <li>▪ USSSA Class "E"</li> <li>▪ USSSA Class "E-Rec"</li> </ul>	<b>CO-ED</b> <ul style="list-style-type: none"> <li>▪ USSSA Class "D"</li> <li>▪ USSSA Class "E"</li> <li>▪ USSSA Class "E-Rec"</li> </ul>	Please write down your first and 2 <sup>nd</sup> requested nights of play. 1 <sup>st</sup> _____ 2 <sup>nd</sup> _____ <i>Refer to slowpitch flyer for pre-determined league nights</i>

**PLEASE PRINT CLEARLY**

Team Name \_\_\_\_\_ Team Name Last Year \_\_\_\_\_

Manager's Name \_\_\_\_\_ Email: \_\_\_\_\_

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

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Business Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Assistant Manager's Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_

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

Sponsor's Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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



**REGISTER YOUR TEAM ON-LINE!**  
[www.piercecountywa.org/parks](http://www.piercecountywa.org/parks)  
*click register online button*



**Indicate schedule conflicts on back of this form.**

Payment Amount: \$ \_\_\_\_\_

Payment Type:

Check # \_\_\_\_\_ (Payable to Pierce County Parks and Recreation)

VISA /MC # \_\_\_\_\_

Expiration Date \_\_\_\_\_ Signature \_\_\_\_\_

Office Use Only:

**Amount Received** \_\_\_\_\_

**Receipt #** \_\_\_\_\_

**Date Paid** \_\_\_\_\_

**Refund Policy for Team League Sports**

A \$25.00 service charge will be assessed when a team withdraws from the league prior to the scheduling process. A \$100.00 administrative service charge will be assessed when teams request a refund after the schedules have been completed, and prior to league play. A \$100.00 administrative service charge, plus officials' fee for games played, will be assessed when teams request a refund after league play has started. Refunds will be made to the person listed as head coach/manager of team, not individual players.

**IMPORTANT PLEASE READ**

**CONFLICTS SCHEDULE**

- Men’s & Women’s teams: **Game times are 6:10, 7:20, 8:30 and 9:40pm.** Please indicate below if there is a conflict with the pre-mentioned game times. **Requests are NOT guaranteed!**

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- Co-ed teams (games are played on Sundays). **Game times are 2:40, 3:50, 5, 6:10, 7:20, 8:30 and 9:40pm.** Please indicate below if there is a conflict with the pre-mentioned games times. (*ex: can’t play before 5pm*) **Requests are NOT guaranteed!**

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- Indicate the type of game format preferred:     Single Games     Double Headers     No Preference
- Each team is allowed to mark off **3** calendar days in which they are unable to play. **This is your only opportunity to report conflicts.**

May 2012						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

June 2012						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

July 2012						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

**If you have any questions, please contact (253)798-4141.**