



# Adult Men's Slow-Pitch Softball Leagues

Adult athletic leagues are sponsored by the Inver Grove Heights Parks and Recreation Department to develop, promote and regulate amateur adult sports within the City of Inver Grove Heights. We are a National Softball Federation sanctioned league.

*Returning Team Guaranteed Registration: February 14-28 New Team Registration Begins: March 1*

*Registration Deadline: April 1 (if openings remain)*

Division	Entry Fees*	# Games	Max # Teams	League Play-offs	Non-Res Fee	Conduct Fee	Program #
Monday D/E	\$750	20 (double headers)	16	Yes	\$0	\$50 (refundable)	AP-S100
Tuesday D	\$750	20 (double headers)	20	Yes	\$0	\$50 (refundable)	AP-S101
Thursday D	\$750	20 (double headers)	20	Yes	\$0	\$50 (refundable)	AP-S102

\*Fees include tax

## Frequently Asked Questions

### When will we know what league we got into?

You will receive a receipt email when you register that will show the league that your team is registered for.

### What do my fees pay for?

All fees include balls, scorebooks, officials, league sanctioning (NSF), awards, and league play-offs.

### What are game times?

Game times are 6, 7, 8, and 9 p.m. Games must be completed and lights out by 10 p.m. (City ordinance)

### Where are games played?

Rich Valley Athletic Complex (1841 105th Street E, Inver Grove Heights, MN 55077). The fields are lit and feature 300' fences.

### Is alcohol allowed at the complex?

Rich Valley Athletic Complex, which allows non-intoxicating (3.2) beer. Drinking is NOT allowed on the bench.

### Manager's Meeting

A mandatory manager's meeting will be held in mid-April. All registered teams (must be paid in full at time of registration) will receive an email invite to the meeting.



**For more information: Contact Jen at 651.450.2580 or [jgraham@invergroveheights.org](mailto:jgraham@invergroveheights.org)**

### Registration Options:

MAIL: INVER GROVE HEIGHTS PARKS & RECREATION  
8055 BARBARA AVE; IGH, MN 55077  
PHONE: 651.450.2580  
FAX: 651.259.8047  
EMAIL: [JGRAHAM@INVERGROVEHEIGHTS.ORG](mailto:JGRAHAM@INVERGROVEHEIGHTS.ORG)  
IN PERSON: Veterans Memorial Community Center  
8055 Barbara Avenue; IGH, MN 55077



# REGISTRATION FORM INVER GROVE HEIGHTS PARKS & RECREATION DEPARTMENT

**MANAGER INFORMATION:**

*Date Received:* \_\_\_\_\_ *Staff Initials:* \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Email: \_\_\_\_\_

TEAM NAME	League Night	Program #	League Fee	CONDUCT FEE	TOTAL DUE

**PAYMENT TYPE:** Credit Card: Cash \_\_\_\_\_ Check # \_\_\_\_\_ **TOTAL: \$** \_\_\_\_\_  
(made payable to VMCC)

Card Info  
**Name on card** \_\_\_\_\_ **Account Number** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Expiration** \_\_\_\_\_ **Code** \_\_\_\_\_

Office Use Only  
 Conduct Form Received \_\_\_\_\_ DATE \_\_\_\_\_ Staff Initial \_\_\_\_\_ Roster Received \_\_\_\_\_ DATE \_\_\_\_\_ Staff Initial \_\_\_\_\_

**PROGRAM /CLASS REFUNDS:** Your money will be refunded if your class/program is cancelled due to insufficient enrollment or if it is filled before we receive your registration. Refunds will be issued in the form of a check or reimbursement to your credit card.

**If YOU cancel your class/program:** Up to the start date of your class, you will receive a full refund less a \$5 processing fee. No refunds will be given after the start date of the program. Field trips, S.P.A.R.K., Mayer Arts, Music Together, Skyhawks Sports Camps and adult league refunds are not given after the registration deadline. The Kids R.O.C.K. enrollment fee is non-refundable.

**Concussions:** The Minnesota State Legislature passed a new law (Minnesota Statutes, Section 121A.37), which went into effect September 1, 2011 aimed at preventing and identifying concussions in youth participating in sports. Training will be provided to all coaches, staff and instructors. Free online course and credible information on the CDC website: Heads Up: Concussion In Youth Sports [www.cdc.gov/concussion/HeadsUp/youth.html](http://www.cdc.gov/concussion/HeadsUp/youth.html)

**Tennessen Warning:** The information requested on the registration form will be used to verify eligibility and determine staff, facility and equipment needs. The information you provide may be provided to City staff, volunteers, legal counsel, insurers and auditors. Although you are not legally required to disclose the information requested, failure to do so will prevent you or your child(ren) from participating in the activity or program. Participation in the activity for which you are registering for is strictly voluntary. The activity you are registering for is not an essential service provided by the City.

**Photographs of Participant:** I understand that photographs of Participants may be used in the City's promotional or other published materials. If Participant does not wish to be photographed or included in these materials, Participant must provide written notice of the same. Assumption of Risk: By executing this form, you are acknowledging that the activity you are registering for may be dangerous and may involve certain risks, including but not limited to bodily injury, personal injury, sickness, disease, death and property loss or damage to yourself or others. By executing this form and participating in this activity, the Participant is assuming all such risks, known or unknown, anticipated or unanticipated.

**Required Waiver:** In consideration for being allowed to participate in the activity, Participant and/or Participant's parent, legal guardian, or conservator hereby releases, indemnifies, defends and holds harmless the City, its officers, officials, employees, insurers, agents, contractors, representatives, and servants, from and against all liabilities, claims, causes of action, demands, losses, damages, judgments, and other obligations (including attorneys' fees and costs), including those arising from any third party claims, on account of injury, loss or damage which arise out of, or are in any way related to, participation in the above-described activity or use of the City's facilities/property.

**Note:** If Participant is under 18 years old or has a legal guardian or conservator, this release must be signed by the custodial parent, legal guardian or conservator. I certify that I am the custodial parent, legal guardian or conservator of the above-named Participant. I hereby consent to his/her participation in this activity and any emergency medical treatment which may be rendered to Participant. I shall be liable for the cost of such medical treatment or services. I have read and understand the above terms and conditions and agree to be bound by them.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Name of Parent / Legal Gurdial / Conservator

\_\_\_\_\_  
Signature of Participant (if over 18) / Parent / Legal Gurdial / Conservator

\_\_\_\_\_  
Date



## 2018 TEAM CONDUCT AND ELIGIBILITY POLICY

The Inver Grove Heights Parks and Recreation Department has instituted a "Team Conduct and Eligibility Policy" for Adult Softball Leagues.

Each team will be required to pay a **\$50 deposit fee** at the time of registration.

The conduct fee cannot be a check from your team sponsor. The conduct fee will be deposited into a city account and returned without interest at the end of the season, approximately August 31. We will return the amount in full pending no violations of the team conduct or player eligibility.

Teams will forfeit their "Team Conduct and Eligibility Fee" for the following violations:

Failure to provide roster - **\$25 for late roster, \$50 for failure to submit.**

Alcohol consumption - during a game on the bench or playing field - **\$50 per incident.**

Physical contact made with official or another player - **\$50 per incident.**

Player ejection - **\$25 per ejection.**

Ineligible/unrostered player - **\$25 per violation.**

Unannounced forfeit - Less than 24 hours of scheduled game - **\$25 per game.**

**\*\*forfeits must be made known via email so as to provide a paper trail\*\***

Teams must post another \$50 fee prior to their next game if they lose their initial conduct deposit due to violations.

As manager, I agree to be responsible for knowing the rules governing the league play in Inver Grove Heights. I agree to inform each of my team members of the Team Conduct and Eligibility Policy. I agree to be responsible for the conduct of all players on my team.

Return check should be made out to:

\_\_\_\_\_  
Team Manager's Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Team Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
League

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
Date Rec.

\_\_\_\_\_  
By:

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