

# GetUp&Go

Recreation and Parks

www.brooklynpark.org

**Brooklyn Park**   
**Recreation & Parks**

**Fall 2019**

**BROOKLYN PARK**

**ADULT  
SOFTBALL**

**—NEW—  
Registration  
DEADLINE  
AUGUST 7<sup>TH</sup>!**

City of Brooklyn Park  
 Recreation & Parks Department  
 5600 85th Avenue N.  
 Phone: 763-493-8333

Team Name last season, if different  
 from this year \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**— Read Before Registering —**

I understand that there is a certain risk involved in participating in any type of organized athletic activity. If I am involved in an accident resulting in personal injury, I hereby assume the responsibility and release the City of Brooklyn Park from any responsibility or liability resulting from it.

Fall Season does not have an end-of-season double-elimination tournament

Program	Program #	Day	Regular Season Games	Double or Single Headers	Season Start	Fee**
Men's D/E Church	707103.01	Thursday	10	Double headers	August 29	\$425

**\*No team roster is submitted for Fall League — All players must be 18 years old by the first game.**

**\*\*Total program fee must be submitted with your registration form; no partial payments accepted.**

**\*\*\*League winner gets cash prize (not shirts/trophies) based on number of teams in league (i.e. 12 teams x \$15 = \$180 prize)**

Team Name: \_\_\_\_\_ Manager \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

All the information on this roster is, to the best of my knowledge, true and complete. PLEASE CHECK METHOD OF PAYMENT BELOW

Manager's Mailing Address:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ zip \_\_\_\_\_

**Payment — CASH OR CHECK:**

- Cash: Bring to the CAC address below
- Check # \_\_\_\_\_
- Mail checks (payable to): **City of Brooklyn Park**, ATT: Adult Softball, 5600 85th Avenue N, Brooklyn Park, MN 55443

**Payment — CREDIT CARD:**

**Credit card payments cannot be processed by mail or fax**

- Call: I will pay by calling: 763-493-8333
- Online: I will register online at: [www.brooklynpark.org/registration](http://www.brooklynpark.org/registration)
- In person: I will bring payment to 5600 85th Ave N, Brooklyn Park, MN 55443
- Call me at this #: \_\_\_\_\_ for office staff to assist with card processing

**NOTICE:** Information requested on this form is classified as either "Public" or "Private" pursuant to the Minnesota Government Data Practices Act. The formation is requested so the registration process can be appropriately completed and persons can be notified for updated program information such as scheduled changes. You are not legally required to provide this information. The consequences of not providing the information may be rejection of the application or inability to make notification of program or scheduling changes to you. Private data will be used by the City staff and others officially connected with the program for the purposes of administering the activity and providing programs/schedule changes. Private data cannot be released to the public without your consent.

**Office Use Only:**

\_\_\_\_\_ Date In \_\_\_\_\_ Time In \_\_\_\_\_ Clerk