Rev. 1/06

Garner Parks & Recreation Department

Team Entry Form

Mailing Address **Office Location**

Sport: (check one)

_____ **Men's Open Basketball** _____ **Men's Open Softball** _____ **Co-Rec Softball**

_____ **Men's Volleyball** _____ **Women's Softball** _____ **Women's Basketball**

_____ **Co-Rec Volleyball** _____ **Men's Closed (Church, Club, Industrial) Softball**

P.O. Box 446
Garner, NC 27529

Telephone
(919) 772-4688

900 Seventh Avenue
Garner, NC 27529

Men's Open Softball Classification: _____**A** _____**B** _____**C** _____**D**
(Check one, all classifications may not be offered each season)

Name of Team_____
Team Manager_____
Manager's Address_____
City_____ **Zip**_____
Telephone (Home)_____ **Telephone (Work)**_____
Secondary Team Contact_____
Telephone (Home)_____ **Telephone (Work)**_____

Permission to Use Image
I grant the Town of Garner permission to use, for any legitimate reason , any photographs, motion picture or recording of my teams participation in this activity.

In submitting this application, the manager agrees to abide by all rules and regulations established by the Garner Parks & Recreation Department and to pay all fees charged against the team. The managerr further certifies that all information on the attached roster is correct and all players are eligible as set forth in the league rules. The manager also understands that all fees must be paid in order for the team to participate. I understand that any falsification of information on the team roster may result in my team being ejected from the league and any other recreation activities. No changes are to be made to the team roster without concurrence by the Athletic Director.

_____ _____
Manager's Signature **Date**

Required Affidavit For Closed League

I do hereby certify that I am familiar with the membership or employment records of the church, club or company which this team represents and that all of the players on the roster are actively involved in the religious endeavors of the said church or have been active members of said club for at least three months, or are employed full-time by said company: and to the best of my knowledge, each player is eligible to participate in the Garner Parks & Recreation Closed League.

_____	_____	_____	_____	_____
Signature of Official	**Title**	**Phone**	**Name of Organization**	**Date**

Office Use Only

Date Form Received _____ **Time** _____ **Verified By** _____

Team Entry Fee ..... **=$**_____

Individual Fees _____ **Non-Residents x $20** ..... **=$**_____

Total Amount Due..... **=$**_____