



MEN'S BASKETBALL LEAGUE

Campbell Recreation & Community Services • 1 W. Campbell Ave. C-31, Campbell, CA 95008
(408) 866-2104 • www.cityofcampbell.com/recreation

Winter/Spring 2017

League Contact: Carlo Rizzo – Recreation Specialist • (408) 871-5192 • carlor@cityofcampbell.com

<u>League Dates:</u>	<u>Playoff & Championship Dates:</u>	<u>League Location:</u>
Jan. 25 through Mar 31* Through Nov. 30th*	The 2 weeks after league play Top 4 teams will be eligible for playoffs	Campbell Community Center Main Gymnasium

*Campbell Recreation & Community Services reserves the right to adjust the above schedule to meet the requirements of the participants and the league's best interest.

Registration Information

- **All registration is by TEAM ONLY.**
- **Priority Registration (Returning Teams) – Monday Jan. 9 at 8:00am**
 - Returning teams must be comprised of 51% or more of returning players from ONE team roster from the previous season.
- **Open Registration (New Teams) – Wednesday Jan. 11 at 8:00am**
- **League Fee:** \$788 Resident team/\$848 Non-Resident team (10-game season + top 4 team playoffs). Resident team consists of 6 or more Campbell resident players. **Fees must be paid in full at the time of registration.**
 - **Proof of Residency:** Each player claiming Campbell residency MUST be able to provide proof upon request. (Example: valid California ID, current rental receipt, last month's utility bill.)
- **Team Roster must be submitted at the time of registration (see below).**
- Online Registration: Please see links on next page.
- Registration may also be done in person or by fax (408) 374-6965. Fees may be paid by cash (in person only), check, or credit/debit card (Visa, MasterCard, Discover, or American Express). When the league is full, a waiting list will be created.
- No holds or reservations can be made for any team. Teams are accepted on a first come, first serve basis within the registration dates.
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Team Roster Requirements

- At Registration –
 - Minimum of seven (7) players' names with address/contact information
- Before each players' first game –
 - Address/contact information
 - Player signatures
- Teams may make adjustments to rosters up until the end of the third league game. After that, rosters are final and all additional non-resident fees will be due.

Forfeit Rule

- A \$50 forfeit/no show fee may be imposed for teams who are not prepared at game, or who have failed to notify the Recreation Specialist and the opposing team captain by 2pm on game day.

*** PLEASE WRITE LEGIBLY OR TYPE ***

City of Campbell Recreation & Community Services Dept. 1 W. Campbell Ave. C-31 Campbell, CA 95008 Main Office: (408) 866-2104 Fax: (408) 374-6965 Email: recreation@cityofcampbell.com	Level (please circle): 2 3 4 5
Team Name:	
Captain's Name:	
Billing Address:	
City:	Zip:
Credit Card #:	Phone:
Email:	Exp. Date:

EACH TEAM MEMBER MUST READ THE FOLLOWING LIABILITY RELEASE AND THEN PRINT AND SIGN THEIR NAME ON THE ROSTER

I agree to release the City of Campbell and Campbell Redevelopment Agency, their officers, employees, and agents from any liability for accidents, injuries, loss of and/or damage to my person or property that may arise out of my participation in or presence at the above activity. I certify that I am in good physical health, and there is/ are no reason(s) why I should not participate in or be a spectator at this activity. I am aware that there are certain risks or possible dangers in participating or being a spectator at this activity. I am aware of the rules of this facility and activity and the player's Code of Conduct and I agree to abide by them. I am aware that this league is sanctioned by SANCRRA, and agree to abide by the SANCRRA Rules and Code of Conduct. I have entered into this agreement of my own free will.

SIGNATURE	PRINT NAME	ADDRESS	CITY	PHONE
1 Captain				
2 Co-Captain				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

2016 WOMEN'S WINTER/SPRING BASKETBALL ROSTER/LIABILITY FORM

FOR OFFICE USE:
of Non-Residents _____ x \$10 = _____