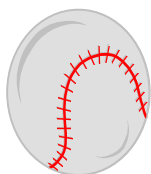


City of Agoura Hills
Department of Community Services
30610 Thousand Oaks Blvd. Agoura Hills, CA. 91301
(818) 597-7361



SUMMER 2006 WOMEN'S SOFTBALL LEAGUE ACTIVITY #: 4615.300



League will play on Saturdays at Chumash & Forest Cove Parks in Agoura Hills. League play is scheduled to begin Saturday, June 10, 2006. Mandatory manager's meeting will be on Wednesday, May 10, 2006 at 6:00 p.m. at the Agoura Hills Recreation Center.

League Fee is \$400 for 10 games plus playoffs. First place individual awards, will be given out for each division. If money is not received by Friday, May 26, 2006 at 4:00 p.m., there will be an additional non-refundable \$50 charge.

League fees does not include \$12 official's fee per team, per game.

*A REFUNDABLE \$40 FORFEIT FEE IS REQUIRED AT THE TIME OF REGISTRATION.

No refunds will be issued for games rained out.

ALL FEES MUST BE PAID BY FRIDAY, MAY 26, 2006 AT 4:00 P.M.!

SCMAF (Southern California Municipal Athletic Federation) Team Registration and Players Medical Benefit Fund is included in the team registration fees. Membership in SCMAF includes a rule book and information on area tournaments. SCMAF Team Accident Protection Program insurance is available for an additional fee.

**For more information, please call the
Agoura Hills Recreation Center at (818) 597-7361.**



REGISTRATION APPLICATION WOMEN'S SOFTBALL LEAGUE

PLEASE PRINT. ALL REQUESTED INFORMATION MUST BE COMPLETED OR APPLICATION WILL BE RETURNED.

TEAM NAME: _____

SEASON/YEAR: _____ ACTIVITY #: _____

MANAGER'S NAME: _____

ADDRESS: _____ CITY/ZIP: _____

HOME #: _____ WORK/CELL #: _____

E-MAIL ADDRESS: _____

ASSISTANT MANAGER'S NAME: _____

ADDRESS: _____ CITY/ZIP: _____

HOME #: _____ WORK/CELL #: _____

E-MAIL ADDRESS: _____

Most recent league (City/District): _____

Season/Year: _____ Team
Name: _____

Division: _____ Record: _____ Number of Returning Players: _____

List any day your team cannot play: _____

Estimate the caliber of your team's play: B C D

Has this team played in a league previously? Yes No

Do you have a forfeit fee on file? Yes No Under Team/Player name: _____

All league days and dates subject to change.

LEAGUE FEES: \$400

*League fee does not include \$12 official's fee per team, per game.

**A \$40 REFUNDABLE FORFEIT FEE IS REQUIRED AT TIME OF REGISTRATON
ALL LEAGUE FEES MUST BE PAID BY FRIDAY, MAY 26, 2006 AT 4:00 P.M.!**

To register, return this application with the appropriate signatures and total team fees to the Agoura Hills Recreation Center located at: 30610 Thousand Oaks Blvd., Agoura Hills, CA. 91301. For more information, call (818) 597-7361

OFFICIAL USE ONLY

Date & Time: _____

Method of Payment: _____

Charge Late Fee?: Yes No

Charge Forfeit Fee: Yes No

Discounted Fee: Yes No

Amount Total:\$ _____

COMPLETE IF PAYING BY CREDIT CARD

CREDIT CARD NO. _____/_____/_____/_____

Exp. Date _____ VISA MASTERCARD DISCOVER

Name as it appears on card _____

Cardholder's Address _____

Cardholder's Phone number _____