

GOLDEN SENIORS SOFTBALL CLUB OF SACRAMENTO

2012 NEW MEMBER APPLICATION

Date rec'd _____ by _____
Check Number: _____
Check Amount: _____

Phone: Home () _____
 Cell () _____
 Work () _____

E-mail: _____

PLEASE PRINT

Name: _____ Spouse's Name: _____
 Address: _____ Date of Birth: _____
 City: _____ State: _____ Zip: _____

PREVIOUS SOFTBALL EXPERIENCE:

Have you played softball in recent years? Yes or No If so, at what level have you played? _____
 Your height: _____ Your weight: _____ Positions you can play: _____
 Bat: R or L Throw: R or L Your speed: Fast - Average - Slow (circle one) Regular position in the batting order: Top - Middle - Bottom (circle one) Comments: _____

MEMBERSHIP:

I am applying for membership as a:

Playing Member: Dues \$115 Non-Playing Member: Dues \$30 Dues \$ _____

Your dues of \$115 will cover your membership in the Club as well as the fees for your primary league. If you choose to play in a night league, there will be a \$15 non-refundable surcharge added to your dues for each night you select. This will help cover the extra costs charged by the Complex for the use of the lights. Please add the total dues, additional league fees and surcharges by following the arrows.

Which League is your first (or only) choice:

Place a "X" in the box. The fee for this League is included in your membership dues. This is your **Primary League**:

League #1 Monday Day (70 +) 9:30 a.m. / Howe Ave Park
 League #2 Tuesday Day (60 +) 9:00 a.m. / Watt Ave Complex

League #3 Tuesday Night (50 +) Watt Ave Complex
 (Please include the \$15 surcharge fee for this night league) →
 League #4 Wednesday Night (50 +) Watt Ave Complex
 (Please include the \$15 surcharge fee for this night league) →
 League #5 Thursday Night (50 +) Watt Ave Complex
 (Please include the \$15 surcharge fee for this night league) →

League #6 Tuesday Day (60 +) 10:30 a.m. / Watt Ave Complex
 League #7 Tuesday Day (67 +) 10:30 a.m. / Watt Ave Complex

Add your additional League requests. Each additional League will be \$95.

	2nd	3rd	4th	5th
<input type="checkbox"/> L1	<input type="checkbox"/> L1	<input type="checkbox"/> L1	<input type="checkbox"/> L1	<input type="checkbox"/> L1
<input type="checkbox"/> L2	<input type="checkbox"/> L2	<input type="checkbox"/> L2	<input type="checkbox"/> L2	<input type="checkbox"/> L2
<input type="checkbox"/> L3	<input type="checkbox"/> L3	<input type="checkbox"/> L3	<input type="checkbox"/> L3	<input type="checkbox"/> L3
<input type="checkbox"/> L4	<input type="checkbox"/> L4	<input type="checkbox"/> L4	<input type="checkbox"/> L4	<input type="checkbox"/> L4
<input type="checkbox"/> L5	<input type="checkbox"/> L5	<input type="checkbox"/> L5	<input type="checkbox"/> L5	<input type="checkbox"/> L5
<input type="checkbox"/> L6	<input type="checkbox"/> L6	<input type="checkbox"/> L6	<input type="checkbox"/> L6	<input type="checkbox"/> L6
<input type="checkbox"/> L7	<input type="checkbox"/> L7	<input type="checkbox"/> L7	<input type="checkbox"/> L7	<input type="checkbox"/> L7

Circle the surcharge fee for each night league
\$15
\$15
\$15

Total Additional League Fees: \$95 \$95 \$95 \$95 \$ _____

Total Membership Dues plus Additional League Fees and Surcharges enclosed: \$ _____

Please complete and sign the reverse side of this form

Should you not play in a League you have selected, you will receive a full refund. Should you leave the Club after playing in a League, you will not receive a refund if the request is made after June 30, 2012. To avoid confusion about your intent and the date, all refund requests must be made in writing to the Club's Player Agent.

How many games do you expect to miss due to vacations, work, or elective surgery? _____
Are you still recovering from an injury, a surgery or an illness? Yes ____ No ____ Please explain:

Mail the Application: A check for the full amount of membership, including the amount for additional leagues and surcharges, must accompany the application unless prior arrangements are made with the Club's Player Agent. Your application may not be accepted until the dues and additional fees are received. Please make the checks payable to G.S.S.C. Please send the application and check to the Club's Player Agent:

Linda McCollum-Greene

6519 Barkley Way

Sacramento, CA. 95828

RELEASE AND WAIVER

I, hereby, assume full responsibility for the risk of injury and/or consequences for participating in games of the Golden Seniors Softball Club of Sacramento. I further assume complete responsibility when I refuse to wear or use protective gear provided by the GSSCS.

I render the GSSCS officers, directors, commissioners, managers and all members and sponsors harmless in the event of any injury or illness I may incur while participating in the Club's games and activities.

CODE OF ETHICS

As a member of the Golden Seniors Softball Club, I agree that I will conduct myself as a gentleman/lady at all times and that when participating in Club activities, I will:

1. Abide by the By-Laws of the Club and the rules and decisions of the Club Officials.
2. Accept the decisions of the umpires and my team manager.
3. Avoid bodily contact that may cause injury to myself or others.
4. Refrain from publicly degrading fellow Club members.
5. Never direct abusive or profane language at the official or fellow Club members.
6. Control the use of alcoholic beverages so as not to offend anyone or to cause adverse criticism of the Club.

APPLICATION

By signing this application, I hereby apply to be a member of the Golden Seniors Softball Club of Sacramento.

1. I agree to abide by the Club's rules as well as the Club's Code of Ethics.
2. I release the Club and its officers from any liability for any injury I may incur while traveling to and from a GSSCS game as well as any injury while playing in a GSSCS softball game.
3. I will be 50 years of age or older by December 31, 2012. Therefore, I am eligible for membership in GSSCS. I understand the presentation of a photo ID may be required to confirm this eligibility.
4. I am aware the By-Laws, Playing Rules and Code of Ethics of the GSSCS will be enforced. I am further Aware that unethical or un-sportsman like behavior on my part may be cause for disciplinary action up to and including termination of my GSSCS membership.

Signature of Applicant: _____ Date: _____

Notes to the Player Agent: (special requests or issues of concern)

Please do not include my phone number on any list distributed to general Club members.

Please complete both sides of this form