

UCSB Recreational Sports  
Rec Cen Rm#1110  
(805) 893-3253  
Softball Coordinators: Joseph Chung & Jack Kelley

## **26<sup>th</sup> ANNUAL UCSB STUDENT/ALUMNI ONE-PITCH SOFTBALL TOURNAMENT, April 26<sup>th</sup>, 2008**

**Sign-ups:** Sign-ups begin immediately. Team managers will receive their schedules at least one week before the tournament. Please have your registration form turned in no later than April 11<sup>th</sup> (late entries will not be accepted.).

**Divisions:** Saturday will be the only day of the tournament. There is no limit to the number of players on each team.

**Cost:** \$200.00 per alumni team and \$75.00 per student team, which includes **10** t-shirts. Extra t-shirts will be available for \$8.00 each. No refunds will be given unless we can fill your space before the weekend of the tournament.

**Rules:** The rules are consistent with our Intramural Softball Leagues. Copies of the rules will be attached to your return packet after we have received your payment. Teams must provide their own equipment and no metal cleats are allowed.

**Rain out:** The decision to cancel the tournament in the event of rain will be made the morning of the day of play. In the event of a cancelled tournament you will receive your **10** t-shirts, but no refunds will be made.

**First aid and accidents:** Each individual participating in Recreational Sports tournaments assumes responsibility for their own health and insurance needs. *The Rec. Sports program and the University cannot assume responsibility for any injuries incurred during the tournament.* Rec. Sports and the University will not assume any payments for medical claims incurred from injuries. All injuries should be reported promptly to the officials in charge of the tournament. It is highly recommended that participants have their own health insurance.

It is the **MANAGER'S RESPONSIBILITY** to pass the above waiver, release, and indemnity agreement information to all members of the team.

**\*\* Parking policy:** As of July 2003, the Transportation & Parking Services had announced that the night/weekend parking will be charged an amount of \$2.00 per vehicle. Please be prepared to pay for your parking spaces if you plan to park in the campus lot. Lot 38 is adjacent to Storke Field.

**NO ALCOHOL POLICY:** Alcoholic beverages are not permitted at any Intramural event. This policy includes spectators as well as participants. Participants who appear intoxicated due to alcohol or drugs will not be permitted to participate and will be asked to leave the facility. Teams/Individuals who abuse our policy will be barred from future competition. The supervisor and/or officials assigned to the contest

have the authority to make decisions regarding a participant's eligibility. **This policy is strictly enforced. Individuals who do not cooperate will be referred to the Campus Police.**

**26<sup>th</sup> Annual Student/Alumni One-Pitch Softball Tournament**  
**April 26<sup>th</sup>, 2008**  
**Registration form**

Please print or type

Team name: \_\_\_\_\_

Manager's name: \_\_\_\_\_

Phone number (Home): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Assistant Manager: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**First aid and accidents:** Each individual participating in the Recreational Sports tournaments assumes responsibility for their own health and insurance needs. *The Rec. Sports program and the University cannot assume responsibility for any injuries incurred during the tournaments.* Rec. Sports and the University will not assume any payments for medical claims incurred from injuries. All injuries should be reported promptly to the officials in charge of the tournaments. It is highly recommended that participants have their own health insurance.

It is the **MANAGER'S RESPONSIBILITY** to pass the above waiver, release, and indemnity agreement information to all members of the team.

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TEAM ROSTER ON BACK**  
(Each individual **MUST** sign and date)

## Team Roster

<u>Name</u>	<u>T-shirt size</u>	<u>Name</u>	<u>Date</u>
1. _____		11. _____	
2. _____		12. _____	
3. _____		13. _____	
4. _____		14. _____	
5. _____		15. _____	
6. _____		16. _____	
7. _____		17. _____	
8. _____		18. _____	
9. _____		19. _____	
10. _____		20. _____	

Please complete this form along with your payment and send it to:

UCSB Recreational Sports  
Recreational Center Rm.#1110  
Santa Barbara, CA 93106

Phone number: (805) 893-3253  
Email: [ucsbsoftballims@yahoo.com](mailto:ucsbsoftballims@yahoo.com)

Make checks payable to: UC Regents