



# 2021 Adult Softball Fees

Summer Info Sheet & Registration Form

**A \$300 DEPOSIT is required to register a team.**

**Returning teams have until March 12, 2021 to register their team.**

The final deadline to register for MS1/MS2 is April 2, 2021.

The final deadline to register for Womens/COED/MASTERS is April 30, 2021.

League	Fee	Late Fee	Max Teams
MS1	\$ 1,050.00	\$ 75.00	12
MS2	\$ 1,050.00	\$ 75.00	12
Women's	\$ 710.00	\$ 75.00	12
Coed (upper)	\$ 575.00	\$ 75.00	12
Coed (lower)	\$ 575.00	\$ 75.00	12
Masters	\$ 330.00	\$ 75.00	12

All fee balances are due by the following schedule. Rosters are due the first night of play at the concession stand in exchange for your softballs.

**Teams not paid IN FULL will be assessed a \$75 late fee**

League	Due Date
MS1	Wednesday, May 12, 2021
MS2	Tuesday, May 11, 2021
Women's	Monday, May 24, 2021
Coed(upper/lower)	Thursday, May 27, 2021
Masters	Friday, May 28, 2021

*If total fee and late fee are not paid 2 weeks after due date listed above, your team will forfeit until balance is paid. There will be no exceptions.*

**A digital copy of Rules, Schedule, & Team Contacts will be sent by the following dates:**

MS1/MS2	Wednesday, April 21, 2021
Women's/Coed/Masters	Wednesday, May 5, 2021

**Please go to [www.gosoftball.com](http://www.gosoftball.com) to create your roster.**

Please have rosters completed to the best of your ability the first night of ball.

# Summer Adult Softball Registration Form

League (circle)	Total Cost	Payment	Min. Deposit
MS1 (Upper Men's)	\$ 1,050.00		\$ 300.00
MS2 (Lower Men's D)	\$ 1,050.00		\$ 300.00
Women's	\$ 710.00		\$ 300.00
Coed (Upper)	\$ 575.00		\$ 300.00
Coed (Lower)	\$ 575.00		\$ 300.00
Masters	\$ 330.00		\$ 300.00
Late Fee	\$ 75.00		\$ 300.00

**Team Name as you would like it to appear on the website/schedule:**

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### Team Manager Information

Name (First, Last):
Mailing Address:
Phone Number:
Email:
Check Amount:
Receipt: Email or Paper (circle)

### Team Sponsor 1

Name:
Mailing Address:
Phone Number:
Email:
Check Amount:
Receipt: Email or Paper (circle)

### Team Sponsor 2

Name:
Mailing Address:
Phone Number:
Email:
Check Amount:
Receipt: Email or Paper (circle)

Attach additional sheets if necessary

**Total Amount Paid:**

Please make checks payable to: ***Brainerd Parks and Recreation***

Our mailing address is:

**Brainerd Parks and Recreation**

**501 Laurel Street**

**Brainerd, MN 56401**

**\*Refunds can only be issued to payers.**

You cannot request a payment from a sponsor to be refunded to the team manager.