



ADULT BASKETBALL SPRING 2019



LEAGUES:

Monday Night Coed ▪ Thursday Night Coed

FEE SCALE:

- **Early Bird: \$350 PER TEAM (Register by 2/22)**
 - **Regular: \$375 PER TEAM (Register 2/23-3/8)**
 - **Late Registration: \$400 PER TEAM (Register after 3/8)**
- + \$30 per game
paid directly to official**

Roster Size Requirements: Min. 5 / Max. 15

NO TEAM? Sign up as an individual to become a "Free Agent"
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**First game of Spring League will be held on 3/14/19
All Games Played Between 6:00 and 10:00 PM**

Games played @ Arroyo Vista Recreation Center Gym



[/moorparkrecreation](https://www.facebook.com/moorparkrecreation)

moorparkca.gov/adultsports



[@moorparkrec](https://www.instagram.com/moorparkrec)

Registration



- Team registration is open now through March 8, 2019. If space is available, late registration may be accepted according to fee scale.
- **FREE AGENT** list available for single players looking to join a team.
- Thursday night league begins 3/14. Monday night league begins 3/18.
- League fees, deposit form, and registration application are due at time of registration.
- To register, submit league fees and registration application:
 - ⇒ In person to—Arroyo Vista Recreation Center at 4550 Tierra Rejada Road in Moorpark
 - ⇒ By mail to—Recreation Division, 799 Moorpark Ave., Moorpark CA 93021
 - ⇒ By e-mail to—avrc@moorparkca.gov (paperwork only)
- Registration is not finalized until all paperwork is received.

Mandatory Manager's Meeting

Tuesday, March 12

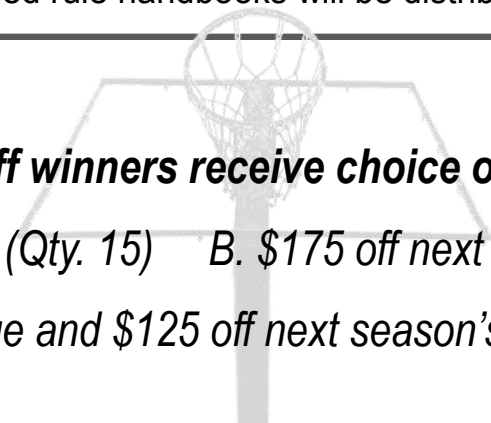
Make-up Meeting: Wednesday, March 13

Time: 7:00 PM **Location:** Arroyo Vista Recreation Center—4550 Tierra Rejada Road

****Team manager, assistant manager, or other representative must attend the meeting. \$25 fee deducted from deposit for teams who do not attend.***

League rules, expectations, and future improvements will be discussed.
Revised rule handbooks will be distributed.

Playoff winners receive choice of one:

- A. Championship Apparel (Qty. 15) B. \$175 off next season's registration fees
C. Sponsor Plaque and \$125 off next season's registration fees
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City of Moorpark
Recreation Division

REGISTRATION APPLICATION
ADULT BASKETBALL LEAGUE SPRING 2019
MUST BE TURNED IN AT TIME OF REGISTRATION

TEAM NAME _____

MANAGER _____ EMAIL _____

ADDRESS _____ CITY _____ ZIP _____

HOME (____) _____ CELL (____) _____

ASST. MGR. _____ EMAIL _____

ADDRESS _____ CITY _____ ZIP _____

HOME (____) _____ CELL (____) _____

DIVISION: _____ "C" - Monday Night Coed _____ "C" - Thursday Night Coed

TEAM TYPE: _____ New _____ Returning _____ Modified (returning with >50% new players)

LEAGUE FEES: Early Bird - \$350 (Register by 2/22)
Regular - \$375 (Register 2/23—3/8)
Late Registration - \$400 (Register after 3/8)

- **Plus \$30 per game paid directly to official**

PAYMENT OPTIONS:

- 1. Check (made payable to "City of Moorpark")**
Drop-off: 4550 Tierra Rejada Rd., Moorpark
Mail: 799 Moorpark Ave., Moorpark CA 93021
- 2. Cash (drop-off only)**
- 3. Visa/MasterCard (by phone only, 805-517-6300)**

OFFICE USE ONLY

Most recent Moorpark record _____ Average Point Differential _____

Notes (roster, playoff info, etc.): _____

City of Moorpark
Parks, Recreation , & Community Services Department

DEPOSIT FORM
ADULT BASKETBALL LEAGUE
FISCAL YEAR 18/19

MUST BE TURNED IN ON OR BEFORE MANAGER'S MEETING

TEAM NAME _____

NEW THIS SEASON: The "Forfeit Fee Form" has been replaced by this "Deposit Form."

A summary of the changes are as follows:

Cash and Check are no longer accepted for forfeit fee deposits. Credit card only. Credit cards will be charged a \$1.00 processing fee to ensure the card is valid. A new card will be required if the card on the file expires or becomes invalid. Also, in addition to unpaid forfeit fees, ***the deposit form permits the City of Moorpark to charge the card on file when a team representative does not attend a mandatory manager's meeting.***

FEES:

\$25—Missed Manager's Meeting Fee \$70—Forfeit Fee* (\$60 forfeit fee + \$10 processing fee.)

**Forfeit fee only charged when team does not pay forfeit fee by next scheduled game.*

Name on card _____

Last four digits on card _____ Expiration _____

Billing Address

City

State

Zip

Cardholder Phone # _____

Do not list full card # on this form. Staff will contact cardholder for card #.

I agree to pay charges described above according to card issuer agreement

X _____

Print Name _____