

# Mason City Parks & Recreation 2023 Fall Adult Softball Leagues



### The registration deadline is Friday, July 28th, 2023.

All the leagues are designed to be recreational and fun. However, to try and keep the competitiveness fair, we have classified the leagues into different divisions.

Any special scheduling requests must be made before the registration deadline. Once the schedule is set, changes will not be made.

All games will be played at Fredrick Hanford Softball Complex. All leagues must use a 12" ASA approved (with ASA stamp) .52/300 yellow optic 12-inch softball. *COED only, 11" core .470 Yellow ASA approved ball.* 

All game times vary (6:00, 7:00, 8:00 or 9:00 p.m.), unless specified.

#### **MONDAY NIGHT: Men's Recreation**

#### TUESDAY (COED)

A League- Competitive COED B League- Recreation COED

#### **THURSDAY NIGHT: Men's Competitive**

There is a maximum of 6 teams per league. However, there may be some leagues that do not fill up. As this happens, the maximum number of teams for certain leagues may increase allowing for more teams to register. If you have any questions regarding how many spots are remaining, please feel free to call Dylan Hall at (641)421-3673 or email at <u>dhall@masoncity.net</u>.

## Mason City Parks & Recreation Department 2023 Fall Softball League Registration Form (Registration Deadline is on Friday July. 28th, 2023)



Captain's Name:\_\_\_\_\_\_TeamName:\_\_\_\_\_ Address:\_\_\_\_\_ City:\_\_\_\_\_ Zip:\_\_\_\_\_ Home/Cell Phone:\_\_\_\_\_\_ Work Phone:\_\_\_\_\_\_ Email Address: Monday Team Fee = \$200/team Wednesday Team Fee = \$200/team Please indicate the appropriate league with an "X": Monday Men's Recreation (\$200) **Tuesday** \_\_\_\_\_ COED A League: Competitive (\$200) COED B League: Recreation (\$200) Thursday Men's Competitive (\$200) Registration with full payment can be mailed or accepted at the Mason City Recreation Dept., Southbridge Mall, 100 S Federal, suite 201. (Mon-Fri 8:00am-4:00pm) All leagues will begin the week of Monday Aug 14th, 2023. FOR OFFICE USE ONLY Date Registered:\_\_\_\_\_\_ Date Deposited:\_\_\_\_\_ Received By:\_\_\_\_\_ Total Amount Due:\$\_\_\_\_\_ Cash\$\_\_\_\_\_Check: \$\_\_\_\_\_ Credit Card:\$\_\_\_\_\_ (Number\_\_\_\_\_ Date:\_\_\_\_ Date:\_\_\_\_ CVC:\_\_\_\_