

City of Carter Lake - Park & Recreation Department
950 Locust St. Carter Lake, Iowa 712-847-0536

TEAM ENTRY FORM

League (circle appropriate one): *Baseball* Softball

Age Group: _____ Team Name: _____

Coach's Name: _____ Cell Phone # _____

Email Address: _____ Home Phone # _____

Address: _____

City, State & Zip Code: _____

Assistant Coach's Name: _____ Cell Phone # _____

Email Address: _____ Home Phone # _____

Address: _____

City, State & Zip Code: _____

FEES REQUIRED AT REGISTRATION

ENTRY FEE: \$ _____

7% Sales Tax \$ _____

TROPHY FEE: \$ _____

TOTAL DUE: \$ _____

CASH _____ (or) CHECK# _____

DATE: _____

RECEIVED BY: _____

1. Notify the Park & Recreation Office immediately of any changes in addresses or telephone numbers for coaches or assistant coaches. We will not accept responsibility for contacting teams concerning changes in schedule if your team information is not kept up to date.

2. If for some reason you decide not to have a team, please notify the Park & Recreation Dept. (847-0536) as soon as possible. Entry fees are not refunded after the team registration deadline.

3. If for any reason you decide to withdraw from the league and scheduling has begun, your entry fee will not be refunded. If you have requested and prepaid for end-of-season participation trophies/medals, and these have not been ordered at the time of your withdrawal from the league, your trophy/medal fee will be refunded.

Printed Name of Applicant

Signature of Applicant

Date _____