



**ADULT SOFTBALL – WEDNESDAY CO-REC
REGISTRATION FORM**

The City of Vadnais Heights
800 East County Road E • Vadnais Heights, MN 55127
Phone: 651.204.6000 • Fax: 651.204.6100
www.cityvadnaisheights.com

2021 ADULT SOFTBALL REGISTRATION FORM

Thank you for your interest in the Vadnais Heights Adult Softball Program. Required information is marked with an asterisk (*). Teams must register for their correct level. For example, a D team cannot play in the E League.

LEAGUE INFORMATION:

- Co-Rec D (up to 8 teams, double headers): Wednesday.
- For teams that want to play for the fun of the game, beginning teams, and teams that have not been successful in other “D” level leagues. Begins May 5 (12 games).
- **This is a combined league** with Vadnais Heights Parks & Rec and White Bear Lake Community Services & Recreation teams.
- Games to be played at Community Park (641 East County Road F, Vadnais Heights) and Lakewood Hills Park (2110 Orchard Lane, White Bear Lake). Teams will play most games at their “home” location; schedules to be determined after the registration period has closed.
- Hourly game times are at 6:15, 7:15, 8:15 & 9:15 p.m.
- Games umpired by certified USSSA officials.
- If you have any questions or need further information, please contact **Vadnais Heights City Hall at 651-204-6000.**

REGISTRATION FEE: __ \$575

You can register online at www.cityvadnaisheights.com (no additional fees apply) or return this form with your registration fee to the address shown above. Checks should be made payable to the City of Vadnais Heights.

Drop Date: Any Vadnais Heights leagues with less than 4 teams by April 1 will be dropped. Teams in dropped leagues will be given the opportunity to switch nights or receive a full refund. Register early to make sure your league can be run!

REGISTRATION GUIDELINES

- Registrations accepted on a first-come, first-served basis - NO PHONE-IN REGISTRATIONS. Payment must be paid in full when registering.
- All registrations must be received by Monday, April 12, by 4:30 p.m.

* **TEAM NAME:** _____

* **Manager:** _____

* **Address:** _____ * **City:** _____ * **Zip Code:** _____

* **Preferred Phone:** _____ * **E-Mail:** _____

Office Use:

Form Received: _____ *Payment Received:* _____ *Credit:* __ *Cash:* __ *Check:* _____
Date Amount Number