Welcome to the City of Cheyenne Community Recreation and Events

2021 Men’s and Women’s Softball League

**Registration:** February 1 – April 8. Late registration April 9 – April 23. Call (307) 637-6423 to schedule a time to drop off registration and roster in person or mail to Kiwanis Community House, 4603 Lions Park Drive, Cheyenne, WY 82001. If paying by check, include check with registration form. If paying by credit card, you will be contacted by phone to make the payment once your registration form is received.

**Fees:** $450/team and $20/player fee. Team fee must be paid at the time of registration or a sponsor sheet, signed by the sponsor, must be presented. Fee breakdown as follows:
- $32.50 per team per game for umpires and scorekeepers (14 games = $455)
- $50 per team USSSA sanctioning fees
- $5 per player fee directly to Parks for maintenance of fields
- Other costs: electricity, equipment, site supervisors, and awards.

**Season:** May 17, 2021 – July 22, 2021

**Locations:** Games will be played at Brimmer and Converse Softball Fields.

**Team Representative Meeting:** To be determined.

If the team representative is unable to make the meeting, please send someone in your place. The meeting is intended for schedule pick-up and any relevant information about the league.

It is required for team representatives to read the 2021 Men’s and Women’s Softball League Rules (posted on www.cheyennerec.org), and all participants must read and sign the City of Cheyenne Community Recreation and Events Athlete Bylaws.

We look forward to having you as part of the 2021 Men’s and Women’s Softball League.

Tyler Feezer
307-637-6408
tfeezer@cheyennecity.org

David Contreras
307-637-6425
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The mission of the Cheyenne Recreation Division is to enrich the quality of life through providing cost effective opportunities for recreational activities focusing on lifelong wellness through exceptional programs, activities, events, for the full age range of the community.
2021 Men’s & Women’s Softball League
Registration Form

Please complete form entirely or registration cannot be accepted.

Team Name: ____________________________________________________________

Sponsor: __________________________________________________________________

Team Representative #1: __________________________________________________

Address: __________________________________ City/State: __________________ Zip: __________

Cell Phone: ___________________________ Provider (for Text Alerts): ______________________

Work/Home: __________________________ Email: _______________________________________

Team Representative #2: ___________________________________________________

Address: __________________________________ City/State: __________________ Zip: __________

Cell Phone: ___________________________ Provider (for Text Alerts): ______________________

Work/Home: __________________________ Email: _______________________________________

Division Preference:
Teams will be assigned to divisions based on the information provided on this form. If information is left blank, League Directors will assume the player/team has upward mobility concerning divisional placement. Indicate your 1st and 2nd choice for the division you can compete in, not just win. Number of divisions based on the number of teams in the league.

[ ] 1 - Excellent Team Ability [ ] 2 - Very Strong Team Ability [ ] 3 - Strong Team Ability
[ ] 4 - Good Team Ability [ ] 5 - Average Team Ability [ ] 6 - Below Average Team Ability
[ ] 7 - Weak Team Ability [ ] 8 - Poor Team Ability [ ] 9 - Very Poor Team Ability
[ ] 10 - Novice/Starters

Last Year’s Team Information:
[ ] Did not play last year [ ] Played last year (please fill out Information below)
Team Name: ____________________________ Last Year’s Division: ________ # of Returning Players: ________

Scheduling Requests: _________________________________________________________________________________________

Office Use: Receipt Number: __________________ Total Payment Amount: ________________
Check [ ] Card [ ] Cash [ ] Sponsor Form [ ] Date Received: ____________________________
Team Roster

* Experience Status -
  A - Major College (4yr) Pro Ball
  B - Jr. College Starter
  C - High School Varsity Starter/Jr, College
  D - High School Varsity Starter
  E - High School Varsity Non-Starter
  F - Below High School Varsity Non-Starter

1. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

2. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

3. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

4. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

5. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

6. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

7. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

8. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

9. Name: ______________________________________ Address: __________________________ Zip ______
   Cell Phone: ___________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
   E-Mail Address: ______________________________________

10. Name: ______________________________________ Address: _________________________ Zip ______
    Cell Phone: __________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
    E-Mail Address: ______________________________________

11. Name: ______________________________________ Address: _________________________ Zip ______
    Cell Phone: __________________________ Provider (Txt Alerts): _______ Shirt Size: _______ Exp: * _______
    E-Mail Address: ______________________________________
12. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

13. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

14. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

15. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

16. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

17. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

18. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

19. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________

20. Name: ___________________________ Address: ___________________________ Zip ________
   Phone: ___________________________ Provider (Txt Alerts): ________ Shirt Size: ________ Exp: *________*
   E-Mail Address: ___________________________