



Adult Basketball **WINTER 2022**



LEAGUES

Monday Night Open Division - Thursday Night Open Division

FEE SCALE: - Early Bird: \$345 PER TEAM (Register on or before 11/30)
+ \$35 per game
paid directly to official - Regular: \$370 PER TEAM (Register 12/1-12/17)
- Late Registration: \$395 PER TEAM (Register after 12/17)

Roster Size Requirements: Min. 5 / Max. 15

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Games begin January 3 & 6

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 December 17, 2021.
If space is available, late registration may be accepted according to fee scale.
- Games begin January 3 & 6, 2022.
- Annual deposit form due at Manager's Meeting for new teams and / or new team managers.
- **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.
 - ⇒ Legible and complete rosters must be turned in on or before team's first game.

Mandatory Manager's Meeting

Monday, December 20, 2021

Time: 6:30 PM Location: Online via Zoom

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



An "open play" **FREE AGENT DROP-IN NIGHT** will be held on Friday, December 10, at the Arroyo Vista Gym from 7:00 PM to 8:00 PM.

New, existing and prospective players welcome. Managers looking for players and/or individuals looking to form a new team should attend.

Playoff winners receive choice of one:

- A. Championship Apparel (Qty. 15) B. \$150 off next season's registration fees
C. Sponsor Plaque and \$100 off next season's registration fees

City of Moorpark
Recreation Division

REGISTRATION APPLICATION
ADULT BASKETBALL LEAGUE WINTER 2022
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: _____ Monday Night Open _____ Thursday Night Open

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

LEAGUE FEES: Early Bird - \$345 (Register on or before 11/30)
Regular - \$370 (Register 12/1 - 12/17)
Late Registration - \$395 (Register after 12/17, if space available)
** Plus \$35 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 21/22
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
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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 _____