

# City of Parma, Ohio



**DEAN DEPIERO**  
MAYOR

Parmatown Mall  
7912 Day Drive  
Parma, Ohio 44129

**MICKEY VITTARDI**  
PARKS AND RECREATION  
DIRECTOR

Phone: 440-885-8144  
Fax: 440-885-8068

January 5, 2009

TO: ADULT SOFTBALL MANAGERS

SUBJECT: ORGANIZATIONAL MEETING

Please be advised that an Organizational Meeting has been scheduled for Wednesday, January 21, 2009 @ 7:00p.m. @ the Parmatown Mall Conference Center, located next door to the Recreation Department.

Your attendance at the meeting is requested. Should there be a scheduling conflict and you are not available, you may send a representative for your team. As always, we welcome and appreciate receiving your suggestions that would improve and make the Adult Softball Program more enjoyable for the participants. Please be aware that a few changes have been made to our league classifications for the 2009 season.

Should you require any further information, please contact the Recreation Department @ 440-885-8144.

Sincerely,

A handwritten signature in blue ink that reads 'Mickey Vittardi'. The signature is written in a cursive style with a large, sweeping initial 'M'.

Mickey Vittardi  
Parks & Recreation Director

CC: Assistant Recreation Director Roberto Discenza  
Softball/Baseball Director Harv Warner  
Softball Asst. Director Gene Zayac  
Umpire Director Leo Allen  
Scorer Association Director George Krovich  
File

**2009**  
**CITY OF PARMA**  
**SOFTBALL ENTRY FORMS**

1. **CITY OF PARMA ENTRANCE FEE FOR MEN'S & WOMEN'S ADULT LEAGUES.....\$115.00**  
*\*\* Make Check Payable to the City of Parma Recreation Department*

2. **CITY OF PARMA ENTRANCE FEE FOR RECREATIONAL COED.....\$65.00**  
*\*\* Make Check Payable to the City of Parma Recreation Department*

3. **PARMA AMATEUR ATHLETIC FEDERATION FEE \*\* Includes Refundable Forfeit Fee**  
Men's Adult Softball/ **OPEN DIVISION** (Doubleheader 1 night a week).....\$453.00 Per Team  
Men's Adult Softball/Divisions I, II, III.....\$425.00 Per Team  
Recreational COED OPEN(Friday or Sunday Evenings).....\*\$240.00 Per Team

**\*\* Make Check Payable to P.A.A.F. (Parma Amateur Athletic Federation)**

The above listed P.A.A.F Fee includes: A.S.A. Sanctioning, game softballs, P.A.A.F. Membership, banquet and trophies and includes a refundable forfeit fee of \$108.00, \$136.00 for Men's Open Division at the conclusion of the season, provided there are no forfeited games. (**\*In the COED ONLY:** the P.A.A.F. Fee **does not** include the banquet and individual awards)

4. **PLEASE PREPARE TWO (2) SEPARATE CHECKS AS NOTED ABOVE. WE WILL NOT ACCEPT ONE CHECK.**

5. **RESIDENCY REQUIREMENTS**

MEN'S ADULT SOFTBALL/ **OPEN DIVISION** .....No Residency Requirements

MEN'S ADULT SOFTBALL/Divisions I, II, III.....Eight (8) Non-Residents Only

RECREATIONAL COED **OPEN** (Friday or Sunday Evening).....No Residency Requirements

6. **\*\*\* A \$20.00 FEE FOR EACH NON RESIDENT IS DUE UPON VALIDATION OF CONTRACT CARDS**

7. **GAME FEES: \$27.00 Per Team & Per Game -Cash on Field (INCLUDES \$20.50 UMPIRE AND \$6.50 SCORER FEE)**  
Men's Open Division ONLY \$34.00 per team & per game – Cash on Field (INCLUDES \$26.00 UMPIRE AND \$8.00 SCORER FEE)

8. **LEAGUES WILL BE LIMITED TO A MAXIMUM NUMBER OF TEAMS. TEAMS WILL BE ACCEPTED ON A FIRST COME BASIS.**

9. **DEADLINES FOR ALL ENTRY FEES AND APPLICATION PACKETS WILL BE:**

**FEBRUARY 26, 2009**



# 2009 CITY OF PARMA ADULT SOFTBALL LEAGUE ROSTER

TEAM NAME: \_\_\_\_\_

**COMPETITIVE LEVEL**

MANAGER: \_\_\_\_\_ **DIVISION I** **DIVISION II** **DIVISION III**

Please Circle One:

HOME PHONE: ( ) \_\_\_\_\_ **MOST COMPETITIVE** **LEAST COMPETITIVE**

WORK PHONE ( ) \_\_\_\_\_ **MEN'S OPEN DIVISION** **COED**

\*\*\*\*\*

THE BELOW LISTED PLAYERS, ARE REQUIRED TO SIGN WHERE INDICATED, AND ARE ACTIVE MEMBERS OF THE \_\_\_\_\_ TEAM AND ARE COVERED BY THE PLAYER AFFIDAVIT. NO PLAYER WILL BE ELIGIBLE TO PARTICIPATE IN ANY GAME UNTIL CONTRACT CARDS ARE VALIDATED. CONTRACT CARDS MUST BE VALIDATED AND NON-RESIDENT FEES PAID AT THE RECREATION DEPARTMENT DURING NORMAL WORKING DAYS AND HOURS.

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### RESIDENCY REQUIREMENTS

**A \$20.00 FEE FOR EACH NON-RESIDENT IS DUE UPON VALIDATION OF CONTRACT CARDS**

**MEN'S ADULT SOFTBALL OPEN DIVISION..... NO RESIDENCY REQUIREMENTS**

**MEN'S ADULT SOFTBALL/I, II, III.....EIGHT (8) NON-RESIDENTS ONLY**

**RECREATIONAL COED OPEN..... NO RESIDENCY REQUIREMENTS**

\*\*\*\*\*

PLAYERS NAME (PRINT)	ADDRESS	CITY/ZIP	PHONE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

**2009**  
**CITY OF PARMA**  
**ADULT SOFTBALL CANCELLATION POLICY**

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**NO POSTPONEMENTS OF SCHEDULED  
 GAMES WILL BE ACCEPTED**

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IF YOU CANNOT FIELD A TEAM FOR A SCHEDULED GAME, YOU MUST NOTIFY THE SOFTBALL OFFICE AT LEAST ONE WEEK (7 DAYS) IN ADVANCE OF THE SCHEDULED GAME DATE. THE GAME WILL RESULT IN A LOSS FOR YOUR TEAM, HOWEVER, THE GAME FEES MAY NOT BE DEDUCTED FROM YOUR FORFEIT FEE ACCOUNT. ONCE A GAME IS CANCELED IT WILL NOT BE RESCHEDULED, EVEN IF THE CANCELED DATE WOULD HAVE RESULTED IN A RAINED OUT GAME.

IF YOU ARE AWARE IN ADVANCE OF ANY DATES ON WHICH YOUR TEAM WILL BE UNABLE TO PLAY, INCLUDING MONDAYS, PLEASE LIST THOSE DATES BELOW. THE SOFTBALL OFFICE STAFF WILL TRY TO HONOR THESE REQUESTS WHEN SCHEDULING YOUR LEAGUE.

PLEASE LIMIT THESE REQUESTS TO A MAXIMUM OF TWO (2) DATES.

MONTH	DATE	DAY OF THE WEEK

TEAM NAME: \_\_\_\_\_  
 LEAGUE: \_\_\_\_\_  
 MANAGER: \_\_\_\_\_

**THIS FORM IS DUE WITH LEAGUE APPLICATION AND ROSTER**