



2024 Summer Adult Softball League Information

January 2024

The 2024 Bloomington Summer Softball Season offers a variety of men's and co-rec softball leagues.

Play begins **Monday, April 22**. Teams will play a 10 or 5-week regular season followed by post-season playoffs on your regular scheduled league night. Teams are sanctioned with both USA Softball and USSSA. League umpires, equipment, and rules follow USA Softball guidelines.

Teams are required to provide gloves, bats, and the provided game balls. Teams are responsible for the game balls when their team is at bat. The game balls do not need to be new but must be identifiable as a legal ball. Legal balls must be optic yellow in color and:

- When a male is batting—12 inch red stitched ball with a COR of .52 and maximum compression of 300 lbs.
- When a female is batting—11 inch red stitched ball with a COR of .52 and maximum compression of 300 lbs.

IMPORTANT DATES

Priority Registration: 1/22–2/12

Open Registration: 2/20–4/08

Transfer Period: 2/13–2/19

Packet Pickup Night: First Night of Play

2024 LEAGUE FEES

Fees include supply of game balls, 10 or 5 week season with playoffs, field scheduling, umpires, and league and playoff champion prizes.

Doubleheader Leagues

- Resident: \$843
- Non-Resident: \$868

Single Game Leagues

- Resident: \$545
\$273 (5 Week)
- Non-Resident: \$570
\$298 (5 Week)

At least 75% of the team must live or work within the City of Bloomington to be considered

Returning Team Priority Registration

Returning teams who played in a 2023 Bloomington summer league may register online during the returning team registration period, January 22—February 12. Returning teams must use their 2023 team's username and password to access priority registration online. Teams are allowed to register for the same league and night which the team participated in during the 2023 summer season. If you do not have this information contact the Parks and Rec Office at 952-563-8877.

Returning Team Transfer Processing Period

No registrations will be accepted between February 13—19. Returning teams requesting a transfer to a new league or night must first register for their 2023 league, and followed by a written request, via email to the League Director. The email must provide team name, contact information, 2023 League, and desired 2024 League. Teams will have their requests reviewed and processed during this period based on league availability and in the order they are received.

New Team/Open Registration

Any team that did not play in a 2023 Bloomington Summer Softball League will be considered a NEW TEAM. To register online, new teams should create a new team login and password at least 2 business days prior to registration and submit their registration on or after February 20, based on the availability of the league.

League Information Next Page

How to Register:

Online: blm.mn/adultsports; **Email:** parksrec@bloomingtonmn.gov;
Mail/Drop Off Registration Form: 1800 W. Old Shakopee Road, Bloomington, MN 55431

LEAGUE CLASSIFICATIONS

To assist teams in finding the appropriate league, the Bloomington Parks and Recreation Department classifies its leagues as Gold, Silver, Bronze, and Church/Spiritual. We continue to sanction teams with USA Softball and USSSA at A, B, C, D & E levels.

<p>GOLD LEAGUES Intended for teams seeking a highly competitive softball experience who typically participate in tournaments.</p>	<p>SILVER LEAGUES Intended for recreational teams who desire a moderately competitive, softball experience.</p>
<p>BRONZE LEAGUES Intended for teams seeking a fun and recreational softball experience with a low level of competition.</p>	<p>CHURCH / SPIRITUAL GROUP LEAGUES Intended for teams consisting of members of a church or spiritual organization seeking a casual softball experience.</p>

MEN'S LEAGUES

Teams must be solely comprised of male players

<u>Day</u>	<u>Leagues</u>	<u>Location</u>
Monday	Silver Doubleheader Bronze Doubleheader	Dred Scott 7, 9, 10 Dred Scott 7, 8, 11
Tuesday	Silver Doubleheader Bronze Doubleheader Church/Spiritual Single Game	Dred Scott 7, 9, 10 Dred Scott 7, 8, 11 Dred Scott 7
Wednesday	Gold Doubleheader Silver Doubleheader	Dred Scott 7, 9, 10 Dred Scott 7, 8, 11
Thursday	Gold Doubleheader Silver Doubleheader	Dred Scott 7, 9, 10 Dred Scott 7, 8, 11

CO-REC LEAGUES

No more than 5 players of either gender playing in the field

<u>Day</u>	<u>Leagues</u>	<u>Location</u>
Tuesday	Silver Doubleheader Bronze Single Game 5 week <i>(Early Summer 4/23-6/4)</i> Bronze Single Game 5 week <i>(Late Summer 6/11-7/30)</i>	Valley View 2, 4 Valley View 11, 13 Valley View 11,13
Wednesday	Bronze Doubleheader Bronze Single Game	Valley View 2, 4 Valley View 11, 13
Thursday	Bronze Doubleheader Bronze Double Header Bronze Single Game	Valley View 2, 4 Dred Scott 9, 10 Valley View 11, 13

GAME INFORMATION

- Games played under USA Softball guidelines.
- Games times are 6:15, 7:15, 8:15 and 9:15.
- Games are scheduled to play 7 innings, and have a 55 minute time limit. No new inning will start after 55 minutes of play.
- Games will be declared complete if there is a 20 or more run differential after 4 innings, or a 10 or more run differential after 5 completed.

Registrations will not be accepted without full payment

Field Details:

Dred Scott 4: No outfield fence
Valley View 11, 13: No lights or fences

Summer Softball Registration Form

Return form via: Email parksrec@bloomingtonmn.gov | Mail/Drop-Off 1800 W Old Shakopee Road Bloomington, MN



Team Information

Team Name: _____

Maximum 20 Characters

Was your team in a Bloomington league last year? Yes No

If yes, what was your previous team name? _____

If yes, in what league and night did you previously play? _____

Are you a new manager for this team? Yes No

If yes, who was the old manager? _____

Are you requesting a transfer to a different league/day? Yes No

If yes, in what league and night did you previously play? _____

If yes, to what league and night do you wish to transfer? _____

Manager Information

First Name _____

Last Name _____

Address: _____

City: _____

Zip: _____

Email Address: _____

**Your email address will be used as the primary form of communication. A frequently-checked email address must be listed **

Phones: H: _____

W: _____

C: _____

****Priority registration for returning teams applies only to the exact league and night a team participated in the previous year. Returning teams who desire to transfer leagues or nights will be processed based on availability and prior to new teams in the order in which registration and payment are received.****

League Fees

Doubleheader: Resident: \$843

Non-Res: \$868

Single-Game: Resident: \$545/\$273(5-week)

Non-Res: \$570/\$298(5-week)

Men's League			
Monday		Gold	Doubleheader
Tuesday		Silver	Single Game
Wednesday		Bronze	
Thursday		Church/Spiritual	

Co-Rec League			
Tuesday		Gold	Doubleheader
Wednesday		Silver	Single Game
Thursday (Dred Scott)		Bronze	Single Game (5 week: 4/23-6/4)
Thursday (Valley View)			Single Game (5 week: 6/11-7/30)

For Office Use Only

Date Received ___/___/___ Staff Initials: _____

The City of Bloomington does not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its services, programs or activities. Upon request, accommodation will be provided to allow individuals with disabilities to participate in all City of Bloomington services, programs and activities. Upon request, this information can be provided in Braille, large print, audio tape and/or computer disk.

Cancellation/Withdrawal Policy

Full refunds will be processed if the league your team is registered for is cancelled by Parks and Recreation due to lack of teams.

Pro-rated refunds will be processed if scheduled games are cancelled and make up dates are not available due to unavailable facilities.

Teams will receive a full refund less a \$50 service charge if your team withdraws at least 3 weeks before the start of play.

Refunds will not be processed if your team withdraws less than 3 weeks before the start of play or if your team is removed from the league due to disciplinary action.

Authorized Fee Amount: \$ _____

Payment Method:

Cash Check # _____ (Payable to City of Bloomington)

Visa MasterCard Discover AmEx

Cardholder Name: _____

Cardholder Signature: _____

Card Number _____ - _____ - _____ - _____

Expiration Date: ___ / ___

Security Code _____

(3 on back, AmEx: 4 on front)