



MEMORANDUM

TO: Adult 50+ Bocce Team Capo's
FROM: J.J. Brannan, Recreation Coordinator
DATE: June 10th, 2024
SUBJECT: Active Adult 50+ Fall Bocce League Information

DIVISIONS OFFERED AND DAYS OF PLAY: One (1) League

Coed - Thursday Morning Division

LEAGUE FEE: \$110 per team of four (4) player's minimum, ten (10) player's maximum.

FEE AND ROSTER DEADLINE: All fees and rosters are due by 5:00 p.m. at the Parks and Recreation Department on Wednesday, July 17, 2024. **Team Rosters will not be accepted without full payment of fees.** Payment will be accepted in cash, one lump sum check (make payable to the 'City of Brentwood'), or Visa/MasterCard.

LEAGUE ENTRY: All teams will be accepted on a first-come, first-served, basis determined by date and time of league fee payment.

LEAGUE MANAGERS MEETING: A mandatory "Capo's" (managers) meeting will be held on Thursday, July 25, 2024 at 12:15 PM in person at the Brentwood Community Center at 35 Oak Street.

LEAGUE PLAY: League play will be held at the Veterans Park Bocce Courts, 3841 Balfour Road, and the Apple Hill Park, 1866 Central Blvd.

START DATES: The league is scheduled to start on August 1, 2024. Game start times will generally be 8:00 a.m. Please call the City of Brentwood Parks and Recreation office at (925) 516-5444 if you have any questions or need any further assistance.

SPECIAL NOTE: Depending on the number of Bocce teams that register, we may need to schedule a second day for games.

City of Brentwood Parks and Recreation Department League Roster

Team Name: _____

2024 Fall Adult 50+ Recreational Bocce League Registration Code: Thursday Mornings #14211

Note: Limit of 4 minimum, 10 maximum per team roster. *Each of the undersigned has read the release on the back if this page carefully and understands and assumes the risks involved.

Team Capo *						Emergency Contact
Last Name, First Name (Print)		Signature	Address	Phone	Email	Name/Phone
Team Co-Capo						
PLAYERS						Emergency Contact
Last Name, First Name(Print)		Signature **	Address	Phone	Email	Name/Phone
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

***TEAM MANAGER Note:** Managers that play on the team must sign the player roster and also be listed as the Team Manager

****PLAYERS - Please Note:** By signing this roster I have read and agree to comply with the attached Brentwood Senior Activity Center Code of Conduct.

Medical Consent and Liability, Indemnity and Participation Agreement

In consideration of my own and/or the above named individual(s) participation in the programs listed above, I voluntarily release the City of Brentwood, Brentwood Union School District and Liberty Union High School District (collectively "City and Districts"), their officers, agents, employees and volunteers from any and all liability for injuries or death, or property damage resulting from or in any way connected with my and/or the individual(s) named above participation in the program. Additionally, as myself and/or as parent and/or guardian of the individual(s) named above, I do forever release and hold harmless and indemnify the City and Districts, their officers, agents, employees and volunteers from all claims or rights of action for damages which myself and/or the above named individual(s) has or may hereafter have, resulting in any way connected with myself and/or the individual(s) named above participating in this program, either before or after the individual named above reaches their age of majority. I understand that this waiver and release is applicable even though the negligent activities of the City and Districts, their officers, agents, employees or volunteers may have caused or contributed to the injury or death or property damage.

In consideration of my own and/or the above named individual(s) participation in the programs listed above do hereby agree to allow the individual(s) named above to participate in the aforementioned activity and authorize the program directors and/or instructors as agents for the above signed to consent to medical, surgical and dental examination, in addition to any and all other treatments that may be deemed necessary by medical personnel. It is further understood that this Agreement is binding on my heirs and assigns, as well as those of the individual(s) named above. I agree that pictures taken during program hours may be used for all future promotional purposes and hereby grant permission to the City to use my own or the above names individuals picture in the City's publications and the City's internet webpage. I further agree on behalf of myself and the above named individual to release and discharge the City, its officers, employees, agents, and volunteers from any and all claims or causes of action arising out of the photograph, name, image or likeness. In the absence of a signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. I agree to return upon request equipment issued to the above participants in as good condition as when received except for normal wear and tear. The City and Districts will not provide health and/or accident insurance for program participants.

I HAVE READ THIS MEDICAL CONSENT AND LIABILITY, INDEMNITY AND PARTICIPATION AGREEMENT, FULLY UNDERSTAND IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

Signature: _____ Print Name: _____ DATE: _____

Check all that apply: Participant Parent Legal Guardian

City of Brentwood Parks and Recreation Department – Manager Responsibilities Agreement

I, _____ hereby agree as the Manager for _____ Team in the City of Brentwood, Parks and Recreation Department Fall 2024 50+ Recreational Bocce League to abide and comply with the following:

I am Responsible for:

- Attending meetings held by the City of Brentwood, Parks and Recreation Department and its representative.
- Being knowledgeable of and keeping his/her team members informed of League rules, policies, schedules, changes and any important information.
- Providing a complete roster to the Parks and Recreation Department.
- Providing proof of residency for all players on his/her team when Team Roster is turned in to the Parks and Recreation Department.
- All players being 50 years of age or older.
- Providing positive identification or proof of residency, if challenged. This proof must be provided within 24 hours of the protest or challenge.
- The payment of all leagues fees, including any NSF payment that may occur.
- The conduct of his/her players and spectators at all times.

I have read and understand the above information. I agree to assume all responsibilities of a team manager.

Signature: _____ Print Name: _____ DATE: _____

6. Rough Tactics - NO PERSON SHALL:

- a. Direct or use unnecessary rough tactics in the course of an activity against the body of another person.

7. Use of Tobacco Products - NO PERSON SHALL:

- a. During the course of an activity as a participant, spectator, volunteer, or official/instructor/person of authority; partake in smoking or chewing tobacco products.

PENALTY:First Offense: Individual/team will receive a warning.

Second Offense: Individual/team shall be ejected from the activity; automatic suspension from the following activity, game, match or meet, and an incident report filed with the lead supervisor.

Third Offense or Flagrant: Increased suspension of activities, games, matches or meets or to a maximum penalty of expulsion from the Department’s programs or use of facilities.

8. Aggression - NO PERSON SHALL:

- a. Attack or act in an aggressive manner towards another person; be a willing participant in a fight; or threaten another person with a physical attack.

9. Alcohol or Gambling - NO PERSON SHALL:

- a. Appear at the activity area at any time in an intoxicated condition or be allowed to consume alcoholic beverages while participating, watching, officiating/instructing, or volunteering during an activity. The presence and/or the consumption of any and all alcoholic beverages are prohibited at all City parks. See Municipal Code 7.02.120.
- b. Gamble or place bets concerning the outcome of an activity with any spectator, volunteer, official/instructor/person of authority, or participant.

PENALTY:First Offense: Ejection from the activity; automatic suspension from the following activity, game, match or meet, and an incident report filed with the lead supervisor.

Second Offense or Flagrant: Expulsion from the Department’s programs or use of facilities, and/or criminal charges filed.

10. Suspended or Non-Rostered Participants - NO PERSON OF AUTHORITY/VOLUNTEER SHALL:

- a. Knowingly allow a suspended participant to participate in a game, match, meet, or activity during the participant’s time of suspension in any manner (such as a player, coach or, scorekeeper) or allow a non-rostered person to actively participate in a game, match, meet, or activity/program.

PENALTY:First Offense: Any game, match or meet that a suspended or non-rostered person participates in will be forfeited. The rostered person will also be suspended from participation at the next scheduled game, match, meet, or activity and the coach/manager may be suspended from the following game, match or meet, or activity/program as determined by the Department. A non-rostered person is not considered a participant. The non-rostered person may not participate on, nor coach or manage any team for the remainder of the season.

Second Offense or Flagrant: Expulsion from the Department’s programs or use of facilities.

11. Acknowledgement:

- a. I hereby pledge to provide positive support, care, and encouragement for those participating by following this Activity Code of Conduct.
- b. I will encourage good sportsmanship by demonstrating positive support for all players, coaches, Brentwood Parks and Recreation Department (“BPRD”) staff, instructors and officials at every game, practice, sports event, activity or program.
- c. I will place the emotional and physical well-being of others ahead of my personal desire to win.
- d. I will support coaches, BPRD staff and officials, in order to encourage a positive experience for all.
- e. I will reinforce an environment that is free from drugs, tobacco, vape and alcohol and will refrain from their use at all activities.
- f. I will treat other players, coaches, BPRD staff, instructors and officials with respect regardless of race, sex, or creed.

By signing this, I hereby acknowledge that I have read, understand, and will abide by the Sports Philosophy and Activity Code of Conduct.

Print Participant Name

Participant Signature

Date

Print Parent/Guardian Name

Parent/Guardian Signature

Date