

## 2025 GSSCS WINTER LEAGUE APPLICATION

**Dates: Mid October to Mid December (weather permitting)** 

MEMBE	ER INFORMATION:					
PRIMARY CONTACT NUMBER (shown on roster)		☐ Cell	☐ Home	☐ Work		
PLAYE	R'S INFORMATION					
Name:	Name:		Birth Date			
Address		City/State/Zip	)			
E-Mail:	E-Mail:		Male	Female		
Emerge Contac	· 1	Phone #:				
2025 WINTER LEAGUE FEE(S) – Select League(s) you wish to participate in.  All games played at Sacramento Softball Complex, 3450 Longview Drive, Sacramento  NOTE: Senior bats approved for use per Senior Softball USA ( <a href="https://www.seniorsoftball.com/">https://www.seniorsoftball.com/</a> or USA Softball ( <a href="https://www.usasoftball.com/certified-equipment">https://www.usasoftball.com/certified-equipment</a> ) bat policies.  LEAGUE  DAY / TIME  Note: 60+ 8-70+ will not conflict  FEE(S)						
22.1		Note: 60+ & 70+ w		1 22(3)		
60+ League (Mens 60+ / Womens 50+) Note: GSSCS L2/L6 rules apply			Tuesday 10:30am or 12pm			
70+ League (Mens 70+ / Womens 60+) Note: GSSCS L1 rules apply			Tuesday 10:30am or 12pm			
Night League (50+ Mens / Womens 40+) Note: GSSCS L3/L4 rules apply			Wednesday Night 6:45pm or 8pm			
2025 Applies	\$25.00					
	s to players who did not play in GSSCS Spring/		OTAL DUE	\$		
Are y	ou willing to be a Manager?	☐ Yes ☐	No			
***Application & Fees due by September 20, 2025***  Payments: May be made by Cash, Check, Paypal or Venmo. Please select payment method:						
	Mail application with check, payable to GSSCS to Dave Tanner (Player Agent):  GSSCS, P.O. Box 1178, Elk Grove, CA 95758-1178.  Applications may be emailed to: davetannergri@yahoo.com					
	Venmo: @GoldenSeniorsSoftball (Note: Don Wall's name will appear. Last 4 phone digits is 3460)					
	Paypal: Clubdues@sacramentoseniorsoftball.org					
	Cash: Indicate who you gave check or money to:					

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Player's Name:						
Please answer the following:						
I do not wish to play with or for:  This information will remain confidential.						
2. Will you need a courtesy runner once you get on base?	Yes	☐ No				
3. Will you miss any games due to work, vacation or elective surgery?	Yes	☐ No				
4. Are you still recovering from an injury, surgery or an illness?	Yes	☐ No				
If Yes to Question 3 or 4, please explain.						
RELEASE AND WAIVER  I, hereby, assume full responsibility for the risk of injury and/or consequences for participating in games of the Golden Seniors Softball Club of Sacramento.						
I hold harmless the GSSCS officers, directors, commissioners, managers and all members and sponsors in the event of any injury or illness I may incur while participating in Golden Senior Club games and activities.						
CODE OF ETHICS						
As a member of the Golden Seniors Softball Club, I agree that I will conduct myself as a gentleman/lady at all times and when participating in Club activities, I will:						
1. Abide by the Rules and By-Laws of the Club as well as the decisions of Club Officials.						
2. Accept the decisions of the umpires and my team manager.						
3. Avoid bodily contact that may cause injury to myself or others.						
4. Refrain from publicly degrading fellow Club members and umpires.  5. Never direct abusive or profane language at an efficial or follow Club members.						
<ul><li>5. Never direct abusive or profane language at an official or fellow Club members.</li><li>6. Always act in the best interest of my team and teammates.</li></ul>						
<ol> <li>Control the use of alcoholic beverages so as not to offend anyone or to cause adverse criticism of the club.</li> </ol>						
Club Member Signature: Date:						

To guarantee inclusion in the draft for each league requested, the application and dues must be **received by September 20, 2025**. Application/fees received after September 20, 2025, no priority will be given. Mail applications to: GSSCS, P.O. Box 1178, Elk Grove, CA 95758-1178 or email to davetannergri@yahoo.com.