



RECREATION AND PARKS

Greenville Recreation & Parks

Spring 2024 Adult Softball

Team Classification Determination Form

Team Name _____

MANAGER:	
ADDRESS:	CITY:
PHONE NUMBER:	ZIP:
E-MAIL:	

These questions, staff knowledge, along with the pre-season tournament games will be used to help determine league and team divisoning. Please provide candid answers to all questions.

1. Did your team participate in last year's softball program?
___ Yes What was the name of your team? _____ What Season? Fall/Spring
___ No
2. Does your current team have a total of six (6) or more players who participated on the same team last year?
___ Yes ___ No Team Name _____
3. Does your current team have a total of six (6) or more players who participated in last year's program on two (2) or more teams?
___ Yes State Number of Players: _____
___ No
4. Does your current team desire to play in the most competitive league (highest classification of play) which will be offered?
___ Yes ___ No
5. What does your team see as the MAIN reason you play in this softball program:
___ Fellowship and Recreation ___ Tough, Competitive Play
6. Rate the overall ability of your team as you see it.
Low end 0 1 2 3 4 5 6 7 8 9 10 High end
7. Rate the overall interest you and your players have in the sport of softball as you see it.
Low end 0 1 2 3 4 5 6 7 8 9 10 High end

Based on the above questions place your team in the league and division you feel is most appropriate.	
League	Division
___ City Open ___ Co-Rec Open	___ A (Serious environment; high level of competition) ___ B (Moderately competitive) ___ C (Strictly a fun, recreational atmosphere)
	Can your team play on Wednesday nights?
	YES NO
* Team placement will ultimately be determined by GRPD staff*	

DO NOT WRITE HERE	
Date Received:	
Amount Received:	
Check No:	Cash:
Packet Received:	Yes No
Team Status:	New Repeat
Received By:	

I understand the divisoning process used by the Greenville Recreation and Parks Department. I have answered these questions truthfully and to the best of my knowledge. In the event I feel my team is not divisoned with equitable teams, I understand I have the right to follow GRPD's procedure for switching divisions but understand this is not guaranteed.

MANAGER SIGNATURE _____ DATE _____