



PICKERINGTON

Parks and Recreation • 100 Lockville Road, Pickerington, OH 43147 • ph: 614-833-2211 • fax: 614-833-2201 • www.pickerington.net

2025 Spring/Summer Adult Pickleball Doubles League Team Registration Form

Office Use Only	
Received Date _____	Cash _____
Approved By _____	Credit Card _____
Total Paid _____	Check # _____
Receipt Number _____	

Team Name _____

Player 1 _____

Address _____

City _____ State _____ Zip _____

Phone (Home) _____ (Cell) _____ (Work) _____

Email (Required) _____

Player 2 _____

Phone (Home) _____ (Cell) _____ (Work) _____

Email (Required) _____

Important Information:

League Fee: \$60/Team/League

Leagues include 7 weeks with 14 regular season matches and a single elimination tournament for the top 4 teams. Leagues consists of 8 teams. Must be 18 years or older before leagues begin. Bring your own equipment and permanent nets are on the courts. Matches are played at Sycamore Creek Park, Taylor Tennis Courts, 281 Hilltop Dr.

Registration Forms can be emailed to recreation@pickerington.net or dropped off at City Hall, 100 Lockville Road, Pickerington, OH 43147

Registration Deadline:

- Spring Leagues – Friday, March 28
- Summer Leagues – Friday, June 6

Adult Pickleball Doubles League rules posted on www.pickerington.net.

Leagues:

2.5 & Below League - League is not intended for players to learn the sport for the first time. Players must understand the rules and game settings.

- Wednesdays at 6:00pm and 7:00pm
- Spring League: April 9 – May 28
- Summer League: June 25 – August 20

3.0 & Above League - League is designed for intermediate and advanced pickleball players.

- Tuesdays at 6:00pm and 7:00pm
- Spring League: April 8 – May 27
- Summer League: June 24 – August 19

Select Leagues (check all that apply):

____ 2.5 & Below League – Spring

____ 2.5 & Below League – Summer

____ 3.0 & Above League – Spring

____ 3.0 & Above League – Summer

Total # of Leagues _____ x \$60 = Total Fee _____

Waiver for Applicant

In consideration of permission granted to me or my child to engage in recreational activities and reservations, I, the undersigned, on behalf of myself, my heirs, executors, administrators and assigns, do hereby release and discharge the City of Pickerington, its employees, public officials, agents, officers, assigns and volunteers for any and all injuries suffered by myself and my child, claims, demands, actions, judgments and executions, which might occur on City of Pickerington premises and/or during City of Pickerington sponsored activities. I recognize and voluntarily accept all of the potential risks and hazards associated with participating in said activities, no matter how remote and unlikely. Further, I recognize the inherent danger involved in such activities and take full responsibility for my actions and physical condition. I hereby consent to receive medical treatment and hereby consent on behalf of my child to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during the event. I do hereby grant and give these groups the right to use my or my child's photograph or image with or without my or my child's name, both single and in conjunction with any persons or objects for any and all purposes including, but not limited to, private or public presentations, advertising, publicity and promotion relating thereto without compensation. I warrant that I have the right to authorize the foregoing uses and do hereby agree to hold the City of Pickerington harmless of and from any and all liability of whatever nature which may arise out of result of such uses. The City of Pickerington reserves the right to cancel this agreement or make a decision on any situation not covered herein. I hereby acknowledge that he/she has read and agrees to comply with the terms and conditions of this agreement. For the consideration stated above, I hereby agree, on behalf of myself, my heirs, executors, administrators and assigns, to indemnify any, all or any combination of the aforesaid, jointly and severally and to hold harmless from and against any and all actions, claims, demands, liabilities, loss damage or expense of whatever kind of nature, including attorney's fees, which may at any time be incurred by reason of my preparation and/or participation in recreational activities and reservations.

Signature _____ Date _____

Payment Method: _____ Cash _____ Check Number _____ Credit Card – Please bill my (circle one): MC or VISA

Name of Cardholder _____ Account Number _____ Expiration Date _____ CVC Code _____

Cardholder Signature _____ Date _____