

INTRAMURAL ENTRY FORM

TODAY'S DATE: _____

SPORT: _____

OFFICE USE ONLY	
Date:	_____
Amount:	_____
Receipt #:	_____
Check RT	Cash
Staff Int:	_____

League (circle one below):	
Men	Women
Sorority	Fraternity
Co-Res	Residence Hall

Division (circle one below):
I: Most Competitive
II: Less Competitive

Pool (see message below):
<i>PLEASE SIGN UP FOR DAY AND TIME OF PLAY IN THE TEAM LEAGUE SIGN-UP BOOK</i>

TEAM NAME: _____

Captain's Name: _____

Captain's Address: _____

Captain's Phone #: _____

Captain's Email Address (print neatly): _____

Co-Captain's Name: _____

Co-Captain's Phone #: _____

ASSUMPTION OF RISK CLAUSE

Individuals are encouraged to have a physical examination and obtain adequate health and accident insurance **PRIOR TO Participation** in a Campus Recreation activity. Individuals who choose to participate in Campus Recreation activities will be doing so at their own risk. Middle Tennessee State University is not responsible for coverage of any injuries occurred. Participation in Campus Recreation is on a voluntary basis.

TEAM ROSTER

NAME (PRINT)	PHONE NUMBER	M-NUMBER	GENDER
1. _____	_____	_____	M F
2. _____	_____	_____	M F
3. _____	_____	_____	M F
4. _____	_____	_____	M F
5. _____	_____	_____	M F
6. _____	_____	_____	M F
7. _____	_____	_____	M F
8. _____	_____	_____	M F
9. _____	_____	_____	M F
10. _____	_____	_____	M F
11. _____	_____	_____	M F
12. _____	_____	_____	M F
13. _____	_____	_____	M F
14. _____	_____	_____	M F
15. _____	_____	_____	M F
_____	_____	_____	M F
_____	_____	_____	M F

**ALL TEAMS MUST
HAVE A TEAM
REP. AT THE
MANDATORY
CAPTAIN'S
MEETING**



**** ALL TEAM ENTRIES MUST BE ACCOMPANIED BY THE APPROPRIATE ENTRY FEE!**

