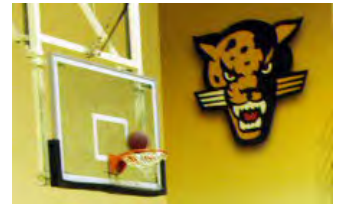


5-on-5 Basketball

Spring 2012 Leagues



INTRAMURAL TEAM REGISTRATION FORM

RETURN TO CAMPUS RECREATION OFFICE (PE 043)

Team Name: _____

Please Print Legibly

Team Shirt Color _____

Captain's Name _____ Phone # _____

E-Mail _____

Captain's Meeting:

MANDATORY - Thursday, January 19th at 5:30pm in CE 409.

Instructions:

Team's must complete this registration form and return it to the Campus Recreation Office (PE 043) before registration deadline **January 17th, 2012 by 4:00 pm in PE 043.**

1. In order for a team to reserve a spot in the league, the team registration fee must be paid when submitting the registration form.
2. Teams will sign up for their desired night of play at the Campus Recreation Office when submitting the team registration form. Nights of play will be filled on a first-come, first-serve basis.
3. One team representative must attend the captain's meeting. Failure to attend the meeting will result in a \$20 default fee to be paid the following day during Campus Recreation Office hours (Friday, 9am to 5pm) which will be prior to the first game.

Agreement:

Prior to the league play, a team representative MUST attend a Captain's Meeting at the designated time and location, which will be promoted throughout the sign up process. As a team representative, you ARE responsible for the following:

- Sports Rules:
(<http://life.iupui.edu/campusrec/intramural/basketball/rules.html>)
- Intramural Sports Procedure
- Sportsmanship
- Eligibility Policy
- Maintaining your team roster
- Asking questions if information is unclear
- Sharing all of the information reviewed and received from the informational Meeting with all my team members
- All members of your team must have a valid IUPUI ID card and have paid the **Spring** Recreation Fee before participation.
- Failure to attend the mandatory captain's meeting will result in a \$20 default fee paid prior to the first game.

I, the undersigned, agree and accept ALL of the above-mentioned responsibilities. This certifies that I have completely checked all the players on my team to be certain that they have paid the recreation fee. I understand if there are any discrepancies, I assume full responsibility. If there are any questions about rules of eligibility, I will be held responsible for contacting the Intramural and Recreational Sports Office.

Captain / Manager's Signature

Intramural 5 on 5 Basketball Team Entry Form



Team Name: _____



Please Print Legibly

Please indicate 1st and 2nd choice you wish to play. Every attempt will be made to honor your choice

1st Choice Schedule:

- Sun. 2:30-4:30 (Men's Rec ONLY)
- Sun. 5:30-7:30 (Men's Competitive ONLY)
- Sun. 8:30-10:30 (Men's Rec ONLY)
- Mon/Wed 8:30-10:30 (Women's ONLY)
- Thur. 8:30-10:30 (Rec & IM)
- Tue/Wed 8:30pm-10:30pm (Co-Ed ONLY)

2nd Choice Schedule:

- Sun. 2:30-4:30 (Men's Rec ONLY)
- Sun. 5:30-7:30 (Men's Competitive ONLY)
- Sun. 8:30-10:30 (Men's Rec ONLY)
- Mon/Wed. 8:30-10:30 (Women's ONLY)
- Thur. 8:30-10:30 (Rec & IM)
- Tue/Wed. 8:30pm-10:30pm (Co-Ed ONLY)

League:
A: Competitive
 (Sun. 5:30pm- 7:30pm or Thursday 8:30-10:30)
B: Recreational-Fun and Less Competitive
 (Sunday, or Thursday)

PLEASE PRINT LEGIBLY

ROSTER

OFFICE USE ONLY

OFFICE USE ONLY

Player's Name

***ID # (202000xxxxxx)**

Wavier Signed

Rec Fee Paid

1
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* Note: ID# are located on the bottom of each JagTag picture.

Office Use Only: Date Rec'd ___ / ___ / ___ Receipt # _____ Amount: \$ _____ Paid: Cash or Check Rec'd by: _____