



INTRAMURALS

WINTER RACQUETBALL SINGLES

ENTRY FORM

1 TEAM INFORMATION

NAME

2 ENTRY TYPE (CHOOSE ONE)

Team: \$6

3 PAYMENT METHOD

MC/VISA/Discover Cash Check # Transfer Voucher #

4 DIVISION (CHOOSE ONE)

All-Campus Men Singles A All-Campus Men Singles B All-Campus Women Singles A

5 PLAYER INFORMATION

PLAYER	
Name	<input type="text"/>
Address	<input type="text"/>
City State ZIP	<input type="text"/>
Local Phone	<input type="text"/>
E-Mail Address	<input type="text"/>

By my signature, I agree to operate my team within the established rules of the Intramural Sports Program, including attending any mandatory meetings; to obtain the rules, policies, and procedures and to review them with my team; and to inform my team of its regular-season and playoff schedules.

PLAYER SIGNATURE _____

6 ROSTER INFORMATION

Individual, Dual, and Team Meets

A team must submit its roster prior to the event, and prior to the roster deadline if one is set. Rosters may not be modified.

VALIDATION AREA FOR OFFICE USE ONLY