

-Arkansas State University-  
INTRAMURAL SPORTS  
**TEAM EVENT FORM**

EVENT \_\_\_\_\_

Team Name \_\_\_\_\_

1) Team Captain \_\_\_\_\_ Main Phone \_\_\_\_\_

ASU E-mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Text Messages:        YES        NO

2) Alternate Team Captain \_\_\_\_\_ Main Phone \_\_\_\_\_

ASU E-mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Text Messages:        YES        NO

Please indicate the league your team represents:

A – Competitive        B – Recreation        Greek – Active ASU member of IFC, NPC, or NPHC

_____ Men's A (No Staff)	_____ Women's A (No Staff)	<i>All University Points</i>
_____ Men's B	_____ Women's B	
_____ Men's Greek A (No Staff)	_____ Women's Greek	<i>Yes        No</i>
_____ Men's Greek B		

*Organization Name:* \_\_\_\_\_

**POOL PLAY ONLY - Please shade the days and times your team CANNOT play.**

Sunday	Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> 5:00	<input type="checkbox"/> 5:00	<input type="checkbox"/> 5:00	<input type="checkbox"/> 5:00	<input type="checkbox"/> 5:00
<input type="checkbox"/> 6:00	<input type="checkbox"/> 6:00	<input type="checkbox"/> 6:00	<input type="checkbox"/> 6:00	<input type="checkbox"/> 6:00
<input type="checkbox"/> 7:00	<input type="checkbox"/> 7:00	<input type="checkbox"/> 7:00	<input type="checkbox"/> 7:00	<input type="checkbox"/> 7:00
<input type="checkbox"/> 8:00	<input type="checkbox"/> 8:00	<input type="checkbox"/> 8:00	<input type="checkbox"/> 8:00	<input type="checkbox"/> 8:00
<input type="checkbox"/> 9:00	<input type="checkbox"/> 9:00	<input type="checkbox"/> 9:00	<input type="checkbox"/> 9:00	<input type="checkbox"/> 9:00
<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:00

**List any specific dates and/or additional information that will be helpful when scheduling your team:**

**Team events** consist of teams of **3 or more players** but with a time frame of **2-4 weeks**. These events will consist of pool play followed by a tournament. There are **NO** caps put on events. If you miss the deadline we will put your entry on a waiting list. If a team drops out the first team on the waiting list will be substituted in its place (same gender of course).

<u>Events</u>	<u>Registration opens/closes</u>
7-on-7 Flag Football	8/25 – 9/3
6-on-6 Indoor Volleyball	9/2-9/30
7-on-7 Outdoor Soccer	10/6-10/28
5-on-5 Basketball	1/12-1/21
6-on-6 Dodgeball	2/2-2/10
9-on-9 Softball	2/16-3/3

*Players meeting dates, times, location, schedules, & rules can be found on the intramural web page at <http://union.astate.edu/intramurals/>*

# TEAM ROSTER

This certifies that I have read and understand the rules of player eligibility and the policies and procedures as outlined in the Intramural Sports Handbook. I certify that all information provided is complete and accurate and that all team members listed on the team roster are eligible for participation according to the rules of eligibility. By signing below I agree to field the minimum amount of players. I also understand that my team can be charged a forfeit fee if I can not field a team. By signing below I understand that it is my responsibility to get the team schedule to my team. I also understand that the team's participation availability is correct. I assume full responsibility for the accuracy of the information provided and for the eligibility and conduct of all listed team members. By signing the roster I agree to release, discharge, & hold harmless against the campus recreation department, Arkansas State University, and, all their agents & employees from claims on account of death, injuries, or for damage to personal property in connection with the activity. By signing below I recognize that this event is voluntary & I am not being forced to play. I also recognize that myself & my team members are in good health & have no physical condition that would prevent me from participating in the event(s).

Captain's Signature \_\_\_\_\_ Date \_\_\_\_\_

**TO BE ADDED YOU MUST HAVE THE MINIMUM AMOUNT OF PLAYERS, PRINT CLEARLY & HAVE A VALID ASU ID**

FIRST NAME	LAST NAME	ASU ID NUMBER
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		

**MAXIMUM AMOUNT OF PLAYERS THAT YOU CAN HAVE ON YOUR TEAM EVENTS ROSTER IS SIXTEEN (16). NO EXCEPTIONS!!!**