INDIANA UNIVERISTY SOUTHEAST
INTRAMURAL & REC.SPORTS
TEAM ENTRY FORM 2010 -11

MEN'S: _____ WOMEN'S: _____ CO-REC: _____

Sport/League: _____

Team Name: _____

(Sexually explicit and/or offensive names prohibited. IM Sports reserves the right to change and/or alter Team Names if necessary.)

FORM MUST BE COMPLETELY FILLED OUT OR YOUR TEAM MAY NOT BE INCLUDED IN THE SCHEDULE

Team Captain:

Name: _____ Phone: _____

Address: _____ Email: _____

Signature: _____

Co-Captain: **Grenadier Cup Points: Greek/ Student Organization _____**

Name: _____ **Men's Open _____ Women's Open _____**

TEAM ROSTER

Student ID #	Last Name (Print)	First Name (Print)	Email Address	Male/Female	Fr. /Soph. Jr./Sr./F&S	Phone Number

Captain's Meetings Are MANDATORY!

Please return on or before advertised entry deadline to:

Intramural & Rec. Sports Office: Room 101 C AK Bldg.

Office Number: (812) 941-2435 Fax Number: (812) 941-2434