



THE UNIVERSITY OF TENNESSEE AT MARTIN

# Intramural Sports Entry Form

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

Captain Name \_\_\_\_\_

Captain Email \_\_\_\_\_

Captain Address \_\_\_\_\_

Captain Phone # \_\_\_\_\_

Captain Student ID \_\_\_\_\_

Please check the appropriate box for your league:

	Men's	Women's	Jack & Jill
Talon			
Claw			
Fraternity/Sorority			

If your team cannot play a particular day, please circle it below (limit to one day).

Monday	Tuesday	Wednesday	Thursday	Sunday
--------	---------	-----------	----------	--------

## AGREEMENT

This is a contract between the team and the Office of Campus Recreation, stating that each of the names on this roster meet the eligibility requirements as outlined in the Campus Recreation Intramural Policies and Procedures.

I understand the Campus Recreation Intramural Sports Policies and Procedures and take full responsibility for explaining these and all other specific rules to the members of my team. I understand that I, or a representative of my team, must attend the Captain's Meeting of this sport.

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

\_\_\_\_\_  
Date

## LEAGUE DESCRIPTIONS

### Talon League

The Talon League is for those participants who feel their team is highly skilled and are seeking a highly competitive environment.

### Claw League

The Claw League is for those participants who feel their team is skilled and are seeking a balanced competitive environment.

## AWARDS ARE LIMITED TO

**12 PER TEAM.**

## COMPLETELY FILL OUT

**THE TEAM ROSTER ON**

**THE REVERSE SIDE.**

Neither the University of Tennessee at Martin nor the Office of Campus Recreation accepts any responsibility for ill health or injury sustained while participating in any of the recreational programs. No medical or ambulance expense incurred by a participant will be paid by the Department or by the University. Program participation is on a voluntary basis. Individuals use the facility at their own risk. It is recommended that all participants undergo a prior physical examination and carry some form of health and accident insurance. If an injury does occur, it should be reported to the nearest Campus Recreation staff member. In the event that blood is involved in an injury, that person cannot continue to participate until the wound is properly cleaned and dressed. Any clothing with blood is required to be removed.

### For Office Use Only

Entry Fee	
Receipt #	
Date	
Initials	

UT Martin is an Equal Opportunity Institution. The University of Tennessee at Martin does not discriminate on the basis of race, gender, color, religion, national origin, age, disability or Vietnam veteran status in provision of educational opportunities or employment opportunities and benefits. UT Martin does not discriminate on the basis of gender or disability in the education programs and activities which it operates, pursuant to requirements of Title VI of the Civil Rights Act of 1964 as codified in 42 U.S.C. 2000D; Title IX of the Educational Amendments of 1972, Public Law 92-318; Section 504 of the Rehabilitation Act of 1973, Public Law 93-112; the Americans with Disabilities Act of 1990, Public Law 101-336; and the Age Discrimination in Employment Act. This policy extends to both employment by and admission to the university. Inquiries concerning Title VI, Title IX, Section 504, the Americans with Disabilities Act, and the Age Discrimination in Employment Act should be directed to the Office of Equity and Diversity, 240 Gooch Hall, UT Martin, Martin, TN 38238-5002, 731-881-7202. Charges of violation of the above policy also should be directed to the Equity and Diversity Officer. E05-0235-00-003-09

THE UNIVERSITY of  
**TENNESSEE**   
MARTIN

**TEAM ROSTER**

**TEAM NAME** \_\_\_\_\_

If your team has more than 18 members, please use an additional entry form. You are allowed two (2) coaches, and they must be on this roster.

By signing this form I acknowledge that I am eligible to play intramural sports according to the eligibility regulations outlined in the *Campus Recreation Program Handbook*.

	Name	C or NC †	Skyhawk ID #	Phone	Email Address	Status *	Signature
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
	Coach's Name	C or NC? †	Skyhawk ID #	Phone	Email Address	Status	Signature
1							
2							

\* Status: Fr=First Year Student; So=Sophomore; Jr=Junior; Sr=Senior; GS=Graduate Student; F/S=Faculty/Staff

† C or NC indicates Commuter or Non-Commuter status. A Commuter is anyone living off campus.