UNIVERSITY OF RHODE ISLAND 401.874.5972 www.uri.edu/recservices/imsports

INTRAMURAL SPORTS

FLOOR HOCKEY LEAGUE ENTRY FORM

Team Name:	
Division: Men ☐ Co-Rec ☐ Women ☐	
Captain's Name:	Alternate Captain:
Address:	Address:
City/State/Zip	City/State/Zip
Phone:	Phone:
Email:	Email:

The Floor Hockey League will be offered in a 5-game round robin format regular season followed by a single elimination tournament for all qualified teams.. Team entries are due in the IMS Office no later than 5pm on Friday, October 23. Games will begin the week of October 25, 2009. Games will be played primarily on Thursdays starting at 6pm. Some games will be scheduled on Sundays (4pm and later) and possibly late evening on Wednesdays depending on the number of teams registered. Teams should plan on Thursday as the primary day of play.

IN ADDITION TO PAYING THE TOURNAMENT ENTRY FEE AND FORFEIT DEPOSIT ($50 TOTAL), ALL TEAMS MUST HAVE A REPRESENTATIVE (PREFERABLY THE TEAM CAPTAIN) AT THE MANDATORY CAPTAINS MEETING (MONDAY, OCTOBER 26, 7PM, KEANEY GYM ROOM 208). TEAMS THAT ARE NOT PRESENT AT THE CAPTAINS MEETING WILL NOT PARTICIPATE IN THE TOURNAMENT.

Player Name	URI ID #	Email Address

NOTE: Rosters must be completely filled out in order to be eligible for entry. Incomplete forms will not be accepted. Team names are subject to change if deemed inappropriate by the Coordinator of Intramural Sports.

PLEASE READ AND SIGN - As the captain of my team, I agree to operate my team within the guidelines established by the Intramural Sports Program. I have checked the eligibility of all of my team's players and assume full responsibility in the event of any discrepancies. I am also responsible for paying any forfeit fees incurred by my team during the season and understand that failure to comply with these rules will result in disciplinary action as outlined in the Intramural Sports Handbook.

CAPTAIN'S SIGNATURE _____ **DATE** _____

For office use only

Collected by _____

Date _____

Amount paid $_____

☐ Cash ☐ Check #_____