Sport: Men’s and Women's 5x5 Basketball League - Tuesday
Deadline Date: February 10, 2012 to SRC Recreation Services 5pm

Team Organization: ____________________________  Team Name: ____________________________
*Team Captain: ________________________________  *Assistant Captain: __________________________
*CWID: ____________________________  *CWID: ____________________________
*Email: ____________________________  *Email: ____________________________
*Phone Number: ____________________________  *Phone Number: ____________________________

*This information MUST be provided for entry form to be accepted.

League Game Days Are:

Day/Time: Tuesdays, 6-11pm
Location: SRC Gym Court 1&2
Start Date: February 21st
End Date: May 1st

Time selection:

Circle a minimum of 2: 6PM 7PM 8PM 9PM 10PM

Times are 1st come, 1st served.

Upon arrival please check-in at the Intramural Sports table.

I understand that all participants in the Intramural Sports Leagues must be a current student, faculty, or staff member at Cal State Fullerton and that each participant must present a valid Titan ID Card prior to each game. No other form of ID will be accepted other than your valid Titan ID Card. NO ID, NO PLAY. I understand that no changes can be made to the rosters after the second game is played. I understand that this Entry Form is NOT the official roster, but the information provided will be used to verify eligibility to participate. As team captain, I accept full responsibility for the actions of my team.

Signature ____________________________  Date ____________________________
Team Name: __________________________
Organization: ______________________

Print Your Name and Campus-Wide ID # Clearly:

1. Last Name:________________________ First Name:____________________ CWID #:________________
2. Last Name:________________________ First Name:____________________ CWID #:________________
3. Last Name:________________________ First Name:____________________ CWID #:________________
4. Last Name:________________________ First Name:____________________ CWID #:________________
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Student Status
Verified By
Date