Intramural Sports
Team Entry Form

Sport: CoEd Softball - Monday
Deadline Date: March 9, 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: Mondays, 6-10pm
Location: South Softball Field
Start Date: March 19th
End Date: May 7th

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 #:____________________
5. Last Name:_________________________ First Name:_________________________ CWID #:____________________
6. Last Name:_________________________ First Name:_________________________ CWID #:____________________
7. Last Name:_________________________ First Name:_________________________ CWID #:____________________
8. Last Name:_________________________ First Name:_________________________ CWID #:____________________
9. Last Name:_________________________ First Name:_________________________ CWID #:____________________
10. Last Name:_________________________ First Name:_________________________ CWID #:____________________
11. Last Name:_________________________ First Name:_________________________ CWID #:____________________
12. Last Name:_________________________ First Name:_________________________ CWID #:____________________
13. Last Name:_________________________ First Name:_________________________ CWID #:____________________
14. Last Name:_________________________ First Name:_________________________ CWID #:____________________
15. Last Name:_________________________ First Name:_________________________ CWID #:____________________

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Status

Verified By

Date