

**YOUNGSTOWN STATE UNIVERSITY  
CAMPUS RECREATION/INTRAMURAL SPORTS  
OFFICIAL TEAM ENTRY FORM AND ROSTER OF PLAYERS**

**All Team Captains are responsible for checking players' eligibility.**  
The Intramural Office is not responsible for any injuries incurred in the program.

**THE \$10.00 NON-REFUNDABLE TEAM FEE MUST ACCOMPANY THIS ROSTER (WHEN APPLICABLE) AND RETURNED TO THE ANDREWS RECREATION AND WELLNESS CENTER ADMINISTRATION OFFICES, ROOM 218. OFFICE HOURS ARE: 8 AM – 6 PM, Monday thru Friday.**

*Please print legibly and neatly. Fill out the form **COMPLETELY**.*

Team Name: \_\_\_\_\_ Sport: \_\_\_\_\_ (CIRCLE ONE)  
(No more than 10 letters) Men Women Co-Rec

Captain: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Captain's Email Address: \_\_\_\_\_ Captain's YSU Banner ID # Y00\_\_\_\_\_

***The name, YSU Banner ID#, and phone number of each team member MUST appear on this roster.***

<u>Name of Player</u>	<u>YSU Banner ID #</u>	<u>Phone</u>
1.	Y00	
2.	Y00	
3.	Y00	
4.	Y00	
5.	Y00	
6.	Y00	
7.	Y00	
8.	Y00	
9.	Y00	
10.	Y00	
11.	Y00	
12.	Y00	
13.	Y00	
14.	Y00	
15.	Y00	

The above players are eligible to play on this team. Additional names may be added to this roster in the Administrative Offices only (see handbook, page 7.) The above players agree to abide by the rules and regulations set forth by the Intramural Office.

Signature of Team Captain \_\_\_\_\_ Date \_\_\_\_\_