## LOYOLA UNIVERSITY MARYLAND INTRAMURAL SPORTS PROGRAM TEAM ENTRY FORM



**SPORT** 

(CIRCLE ONE)



LEAGUE OR TOURNAMENT

FEE:



CAPTAIN			TEAM ROSTER		
CLASS YEAR			NAME	ID#	CLASS YR
ADDRESS		1			
ID#		2			
LOCAL PHONE		3			
CELL PHONE		4			
EMAIL ADDRESS		5			
TEAM NAME		6			
		7			
		8			
DIVISION	MEN	9			
(CIRCLE ONE)	WOMEN	10			
	COED	11			
		12			
LEVEL	A (HIGHLY COMPET	<b>ITIVE)</b> 13			
(CIRCLE ONE)	B (RECREATION	<b>IAL</b> 14			
		15			
responsible for p	paying all fees which are charg re checked the eligibility of all m	led to my Student T nembers of my tean	ent and apparel borrowed by my toution Bill for unreturned and/or don and certify that they are eligible Regulations Handbook.	amaged equipment and	/or
OFFICE USE ONLY					
Date:			Amount of Payment		
Semester & Year:			Form of Payment		
Membership Signature:			Deposit Fee Into: 11_006000000_42020		_4202007