



TROY University Intramural Team Entry Form

SPORT	VOLLEYBALL
TEAM NAME:	

TEAM CAPTAIN(S):	TELEPHONE #(s)	E-MAIL ADDRESS
Name:	Day: Evening:	
Alternate:	Day: Evening:	

Please check off your **DIVISION**:

DIVISION: MEN WOMEN ALL-SPORTS UNIVERSITY

ASSUMPTION OF RISK CLAUSE

Each individual participating in any intramural sport must sign this release form in order to be eligible for this sporting event. **By signing this entry form**, in any event of any accident or injury, TROY University will not be held liable. Please consider this before participating and make sure you are covered by adequate insurance.

GRADE WAVIER

I the undersign agree to allow the office of Intramural Sports to confirm that I have met the overall grade point average to be eligible to participate in Intramural Sports Programs.

TEAM ROSTER				
NAME		STUDENT ID #	PHONE #	SIGNATURE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Each captain is responsible for having each participant understand the rules of the game. Participants will be required to present an I.D. to participate. Any participant who has not signed this form is considered an ineligible participant. **To register, submit your roster and team entry fee to the Intramural Sports office before the deadline.**