INTRAMURALS
TEAM ROSTER

SPORT: __________________________

Team Name: __________________________

PLEASE TYPE ROSTER FORM

Please Circle: Men’s  Women’s  Co-ed

Captain’s INFORMATION

Name*: __________________________

Phone #: __________________________

E-mail: __________________________

NOTES: Only four (4) Varsity Athletes per team are allowed to participate in their equivalent intramural sport.

PLEASE LIST PLAYER NAMES AS IT APPEARS ON THEIR KC ID.

<table>
<thead>
<tr>
<th>PLAYER (indicate KC Student-athletes with: *)</th>
<th>PHONE#</th>
<th>KC ID#</th>
<th>Student/Faculty/Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>(PLEASE LIST PLAYER NAMES AS IT APPEARS ON THEIR KC ID)</td>
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This Roster WILL NOT be accepted unless it is completely filled out.

PARTICIPATION FEES and PARTICIPANT WAIVERS must accompany the TEAM ROSTER in order to be accepted.

Every team member must fill out their own waiver, for each team, the waiver must be hand written and signed.

Please CIRCLE two days that would be most convenient for your team to play. Please ONLY CIRCLE ONE weekend day (Friday - Sunday) and one weekday from Monday- Thursday.

We would like to help fit your schedule! However, due to the large number of teams and limited facility space we may not be able to accommodate your request. Scheduling of Intramural contests is subject to approval by the Student Life Coordinator.

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
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