

INTRAMURAL SPORTS

It's All About the T-Shirt

The Amazing Race Brockport

This form must be completed and returned to the Recreational Services Office by October 2nd @ 4pm

10 Team Limit

Recreational Services (Tuttle North Room 281) ~ 395-5081 ~ www.brockport.edu/recservices

STEP 1

Team Name: _____	All information in this section must be completed! If a team name is not listed or is inappropriate, the Recreational Services Staff will assign the team a name.
Captains Name: _____	
Phone Number: _____	
E-Mail Address: _____	
*Please provide us with a phone number and email address that you check regularly	

STEP 2

Roster:	(List all players that are a member of this team; all information required!)		
	Name	Banner ID #	Phone #
1			
2			
Captains Meeting Info Given	Yes	No	* Circle one