UW-WHITEWATER MARCH 9-10, 2018

WIRSA

STATE OF WISCONSIN EXTRAMURAL TOURNAMENT

TEAM ROSTER

2018 STATE OF WISCONSIN EXTRAMURAL TOURNAMENT TEAM ENTRY FORM

(PLEASE PRINT CLEARLY)

Team Name:

Institution:

Captain:

Address:

City/State/Zip:

E-mail:

(circle one) MEN WOMEN

Phone: - -

Date: / /

Payment (circle): University Check / Cashier's Check / Money Order / Cash

Does your campus use IM Leagues? (circle one) YES NO

RANK	
Staff	6
Grad	5
Sr.	4
Jr.	3
So.	2
Fr.	1

TEAM ROSTER

MAKE SURE ALL PLAYERS SIGN THE BACK OF THIS FORM!

	Player's Name	Identification #	M/F	University E-mail Address: @ (Ex:@uww.edu) .edu	Phone(include area code)	Rank
1					- -	
2					- -	
3					- -	
4					- -	
5					- -	
6					- -	
7					- -	
8					- -	
9					- -	
10					- -	

**I verify that the individuals listed above are currently enrolled students or presently employed faculty/staff members of our institiutuin, are all members of the same instituiton, are not current members of the varsity basketball team or were not members the preceding academic year (including red-shirts), and have not played professional basketball at any time!*

Intramural Director (Please Print) Date Intramural Director Signature

IM Director's Phone Number - -