







INTRAMURAL SPORTS TEAM ROSTER

SPORT/EVENT.	TEAN	/I NAME		
1 Student ID:	Name:		Male: □ F	-emale: □
	Alternate Phone:		_	
Shirt Size:	Campus: Emergency Contact;	: P	hone:	
Participant Sig	gnature: (for the follo		· · · · · · · · · · · · · · · · · · ·	
	(for the follo	owing statements)		
acknowledge that the compensation, either risk incident to the a State University-Tuls losses resulting from Tulsa Community Coresulting or claimed phases of the activite intramural sports we photos on said web and consent to the compensation of	BEHAVIOR: If an individual is ejected from a game by an ible to participate in further competition until he/she meets (E BEHAVIOR: physical abuse of an opponent, spectator, in penalty of suspension for the remainder of the season. TCC/OSU-Tulsa Intramural Sports Programs for the remphysically abusive will be placed on permanent probation of TEAM CAPTAIN SIGNATURE: ties 595-7271 Northeast Student Activities 595-7571 Social Superior of Superior Super	lege and Oklahoma State University-Tulsa this activity is voluntary on their part are Oklahoma State University-Tulsa. The use of activity and acknowledge that Tulsa Oklahoma assume no liability, including finity activity. The undersigned further indensents, its employees, and the State of Oklahoma State University-Tulsa ment of Oklahoma State University-Tulsa ment of Oklahoma State University-Tulsa per or and Oklahoma State University-Tulsa per or COR LEGAL GUARDIAN MUST SIGN BE CONDUCT POLICY amural Sports Program, and could result will not be accepted as a reason for miscoland verbal attacks aimed at opponents. In official or supervisor (whether after a write with the appropriate staff member. The teammate or destruction of property will physical abuse of an official or supervisor regarding intramural activities.	nd for which they undersigned there a Community Columnity Columnity, release, and ahoma against and the involvement of the invo	will receive no efore assume allege, Oklahomality for injuries of dhold harmless y loss or injuries of tin any and alters on the TCC their names and/or manlike conduction of the conduction of
* Your name and tel ** Your signature inc	Activities 918-594-8355 918-594-8126 elephone number will be given to your team captain. If you dicates that you have read and agree with the Student Ac appropriate school student ID or employee ID card in orde	ctivities Waiver and Unsportsmanlike Con		
2 Otrodout ID:	Name		Mala. D	
	Name:			Female: □
Phone:	Alternate Phone:	E-maii:		
	Campus: Emergency Contact:	P	hone:	
Participant Sig	gnature:(for the abo	ve statements)		
3	(
Student ID:	Name:		_ Male: 🖵 🏻 F	Female: □
Phone:	Alternate Phone:	E-mail:		
Shirt Size:	Campus: Emergency Contact:	P	hone:	
	nature:			

(for the above statements)

4 Student ID:	Name:		Male: □	Female: 🗖			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the one of the month	<u>, </u>					
(for the above statements)							
5 Student ID:	Name:		Male: 🗖	Female: \Box			
Phone:	Alternate Phone:	_ E-mail:		· · · · · · · · · · · · · · · · · · ·			
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the above statements	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
(for the above statements)							
*	Name:		Male: 🗖	Female: 🗖			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the charge state we attend	<u> </u>					
(for the above statements)							
7 Student ID:	Name:		Male: 🗖	Female: \Box			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the above statements	<u>, </u>		· · · · · · · · · · · · · · · · · · ·			
(for the above statements)							
	Name:		Male: 🗖	Female: \Box			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the above statements	·)					
9	(corum discord costs)	,					
	Name:		Male: 🗖	Female: \square			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:	(for the above statements	·)					
10							
	Name:		Male: 🗖	Female: 🗖			
Phone:	Alternate Phone:	_ E-mail:					
Shirt Size: Campus:	Emergency Contact:		Phone:				
Participant Signature:(for the above statements)							
	(.5. 1.15 45575 51415/116/116	,					