DOUBLES TENNIS TOURNAMENT

ENTRY DEADLINE: THURSDAY, SEPTEMBER 15th
Campus Recreation in the Student Recreation Center, by 6:00 pm

ENTRY FEE: $4.00 PER TEAM (Includes one can of tennis balls)

PLAY BEGINS: SATURDAY, SEPTEMBER 17th 10:00 am at the assigned court. Matches will be scheduled throughout the entire day. Schedules will be available in the Campus Recreation office on Friday, SEPTEMBER 16, 1:00 pm.

FORMAT: SINGLE ELIMINATION TOURNAMENT. ALL MATCHES WILL BE 2 OF 3 SETS. NO ADD SCORING!! There will be no tie breakers.

1. Check your Intramural Sports Handbook in regard to eligibility, protests, rescheduling, etc.

2. An organization may enter three (3) teams to represent their living unit. However, intramural points will only be awarded to the team advancing the furthest in the tournament; other teams of an organization may enter as Independents.

3. The $4.00 entry fee per person includes a can of tennis balls to be picked up at first round match by each team. One new can should be used in each match. The winner will get the unused can of tennis balls to advance to the next match.

4. **GAME TIME IS FORFEIT TIME!!!!**

5. Please read the attached forfeiture agreement, participation agreement and roster information and return with signatures to the Campus Recreation Office by THURSDAY, SEPTEMBER 15th.

6. Check in 15 minutes before your match at the PEB Tennis Courts with the Intramural Supervisor.

7. All participants must have a waiver on file before playing Intramural Sports.

uidaho.edu/intramurals

Phone: (208) 885-6381

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2016 INTRAMURAL DOUBLES TENNIS TOURNAMENT

TEAM/ORGANIZATION_________________________________________________________

TELEPHONE_________________________________________________________________

Circle One  GREEK  INDEPENDENT  RESIDENT HALL ____________________________

FORFEITURE AGREEMENT

I hereby grant Intramural Sports permission to charge a fee to my university account in the event that my intramural team forfeits its scheduled game. The forfeit will cost me $10.00.

CAPTAIN'S NAME_____________________________STUDENT ID#___________________

SIGNATURE______________________________EMAIL_ADDRESS_________________________

PHONE______________________________________________

Team 1--
NAMES___________/_____________ PHONES___________/_____________

Team 2--
NAMES___________/_____________ PHONES___________/_____________

Team 3--
NAMES___________/_____________ PHONES___________/_____________

**PLEASE RETURN COMPLETED FORM TO CAMPUS RECREATION BY 9/11/13 BY 6PM.

For Office Use Only:
☐ Signed (2)
☐ ID Checked
☐ Paid
Initial ____________