3 on 3 Basketball
Men’s/Women’s
Living Group Point Sport

Entry Deadline:  
Wednesday, October 30th  
Campus Recreation and Wellbeing by 10:00pm  
COST $15 PER TEAM

Format:  
Round Robin League –  
Single elimination tournament to follow

Play Dates:  
Sun Nov 3rd, Sun Nov 10th, Sun Nov. 17th

- Check your Intramural Sports Handbook in regard to eligibility, protests, rescheduling, etc.
- An individual may play on only one team. Each team will provide a scorekeeper.
- Complete schedules and rules will be available on Thursday, October 31st, 4pm SRC Classroom
- Intramural Sports cannot guarantee any schedule preferences. Play is dictated by demand, facilities, and personnel. Teams should expect to play at least two games each Sunday.
- New players who become eligible during league play must add their signature to the roster before playoffs begin.
- Hazards: Risks of participating in Intramural 3-ON-3 Basketball include, but are not limited to: ankle and knee sprains/strains, finger and knee dislocations, wrist sprain, shoulder strain, eye and mouth lacerations, and bruises.
- Please read the attached forfeiture agreement, participation agreement and roster information and return with signatures to the Campus Recreation and Wellbeing Information Desk by 10:00 pm on Wednesday, October 30th. Late entry forms will be subject to a $25.00 late fee.
- All teams with .500 records or better, with 2.85 sportsmanship average will make gold playoffs. Teams with a record below .500 with 2.85 sportsmanship average will make silver playoffs.
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 first forfeit will cost me $40.00, however, my team will still be eligible to finish league play. My team's second forfeit will cost me an additional $40.00 ($80.00 total) and disqualify my team from further competition.

CAPTAIN'S NAME _______________________ STUDENT ID # ___________________

SIGNATURE ____________________________ TELEPHONE # ___________________

EMAIL ADDRESS ________________________________

**PLEASE RETURN TO CAMPUS RECREATION AND WELLBEING WITH TEAM ROSTER BY WED, OCT 18, 6:00 PM.

For Office Use Only:
- [ ] Signed (2)
- [ ] ID Checked
  Initial ___________
  PAID ___________

uidaho.edu/intramurals

University of Idaho
Recreation and Wellbeing

Phone: (208) 885-6381

Intramural_Sports_UIdaho
PLEASE PRINT
TEAM NAME_______________________________________

CIRCLE ONE: MENS WOMEN
CIRCLE ONE: GREEK INDEPENDENT RESIDENT HALL__________________

TEAM PARTICIPANTS ROSTER

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TEAM CAPTAIN OR MANAGER

As captain/Manager of this team, I have had each player read and sign the Registration Permission and Waiver form before participating in this Intramural Sport activity. Further, I have read and explained Intramural Sport rules and particular hazards which could occur from participation in this Intramural Sport event or activity.

SIGNATURE_______________________________________________
DATE____________________
EMAIL_____________________________________________
PHONE#____________________