Ultimate Frisbee League
Men’s/Women’s Leagues

Entry Deadline:
Tuesday, October 18th
SRC Information Desk by 10:00pm
Entry form must include $30.00 payment

Format:
Round Robin League –
Single elimination post-season tournament

Schedules Available:
Thursday, October 20th at Captains Meeting 4p

Play Begins:
Monday, October 24th Kibbie Dome.

- Teams not represented at the Captain’s Meeting will not be eligible for playoffs!

- Games are 5 on 5 using a third of the Kibbie matches are scheduled every half hour starting at 7p.

- Rules and schedules will be available on Thursday, October 20th at Captains Meeting 4p

- Each organization may enter as many teams as they wish, but only one team will be designated as the Intramural Point team.

- Ultimate Frisbee teams require 5 on the field. You may begin the game with 4. Teams will play 3-4 regular season games. All teams with .500 records or better with 2.85 sportsmanship average will make Gold Playoffs. Teams that finish below .500 records with 2.85 sportsmanship average will make silver playoffs.

- Please read the attached forfeiture agreement, participation agreement and roster and return with payment to the SRC Information Desk.
2022 ULTIMATE FRISBEE

TEAM NAME_____________________________________________________________

FORFEITURE AGREEMENT

1. 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.

2. I understand that this team must be represented at the Captain's meeting or we will not be eligible for the playoffs. I am also fully aware of the player eligibility rules enforced by Intramural Sports. There are no members of this team who are ineligible or who are playing this same sport on another Intramural team.

Print Captain's Name     Student/Faculty/Staff ID Number
(Must present current U of I ID when registering)

Signature      Phone Number

Email

**PLEASE RETURN TO SRC INFO DESK WITH TEAM ROSTER.

Day preferred: Please number day preference in order, 1 being most preferred, 2 least preferred

  ____ Tuesday      ____ Wednesday

For Office Use Only:

  □ Signed (2)       □ Day _____________
  □ Paid
  □ League ___________  □ ID Checked
  Initial

uidaho.edu/intramurals

University of Idaho

Phone: (208) 885-6381

UI Intramural Sports

Intramural_Sports_UIdaho
PLEASE PRINT
TEAM NAME ____________________________________________

CIRCLE ONE MEN WOMEN

CIRCLE ONE GREEK INDEPENDENT RESIDENCE HALL ________________

NOTE: My signature on this roster indicates that I have read the agreement form and that I fully understand and accept all aspects of the Intramural Entry form. My signature also indicates that my Intramural Sport team or living group captain or manager have read and explained Intramural Sport rules and particular hazards which could occur from participation in this Intramural Sports event or activity.

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TEAM CAPTAIN OR MANAGER

As captain/manager of this team, I have had each player read this form and sign this roster 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#_____________________

uidaho.edu/intramurals

University of Idaho
Recreation and Wellness

Phone: (208) 885-6381

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