INTRAMURAL SPORTS

FLAG FOOTBALL LEAGUE

Men’s/Women’s Divisions
Competitive/Recreational Leagues
Living Group Point Sport

Entry Deadline:
Wednesday, September 8th
Campus Recreation and Wellbeing by 10:00pm
Entry form must include $30.00 payment

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

Schedules Available:
Thursday, September 9th at Captain’s Meeting
in the SRC Classroom at 4:00pm.

Play Begins:
Monday, September 13th around 5:15pm some
games will begin at 4:15pm

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

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

- Rules and schedules will be available on Thursday, September 9, in the SRC Classroom at
4:00pm.

- Flag football teams require 7 on the field. You may begin the game with 5. Teams will play 4 to
5 games all teams with .500 records and 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.

- Please read the attached forfeiture agreement, participation agreement and roster and return
with signatures to the Campus Recreation and Wellbeing Information Desk by 10:00 pm
Wednesday, September 8th. Late entry forms will be subject to a $25.00 late fee.

- New players who become eligible during the season must add their names to the roster a
minimum of 24 hours before participating. No new player additions after the last league game.

- Each individual will need a waiver on file with the Campus Recreation and Wellbeing office
before playing. Waivers available in the Recreation and Wellbeing Office, SRC Atrium, on line
at the Intramural website or at the contest site.
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 BY Wednesday, September 8th 10p.

Day preferred: Please number day preference in order, 1 being most preferred, 4 least preferred

____ Monday     ____ Wednesday
____ Tuesday     ____ Thursday

For Office Use Only:
☐ Signed (2)    ☐ Day ____________
☐ Paid
☐ League ____________  ☐ ID Checked
Initial
(Please Print)

**Team Name**
_____________________________________________________________________

(Circle One)  Men  Women

(Circle One)  Greek  Independent  Resident 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#________________________