INTRAMURAL SPORTS
Intramural Volleyball League
Men’s/Women’s

Entry Deadline:
Tuesday, October 12th
SRC INFO DESK by 10:00pm

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

Schedules Available:
Thursday, October 14th at Captains Meeting 6p

Play Begins:
Monday, October 18th PEB LARGE GYM

- Team Fee $30.00
- 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.
- Entries open one week before the entry deadline.
- Rules and schedules will be available on Thursday, October 14th in the SRC Classroom at
  6:00pm.
- Volleyball teams must start with a minimum of 4 players. Captains are responsible for eligibility
  of players. Please refer to IM Handbook for details.
- Please read the attached forfeiture agreement, participation agreement and roster and return
  with signatures to the SRC Information Desk by 10:00 pm Tuesday, October 12th. Late entry
  forms will be subject to a $25.00 late fee.
- 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.
- Covid Procedures – All participants will wear face coverings during the duration of game. Only
  exceptions is for drinking water in designated team areas.

uidaho.edu/intramurals
University of Idaho
Recreation and Wellness
Phone: (208) 885-6381

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Follow us: UI Intramural Sports
2021 INTRAMURAL VOLLEYBALL

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, 4 least preferred
____  Monday       ____  Wednesday
____  Tuesday       ____  Thursday

For Office Use Only:
☐ Signed (2)   ☐ Day ______________
☐ League __________   ☐ ID Checked
Initial __________   ☐ Paid __________

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University of Idaho
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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#_________________________

ui.daho.edu/intramurals University of Idaho Recreation and Wellness Phone: (208) 885-6381