



# HACC HAWKS

## INTRAMURAL SPORTS & WELLNESS PROGRAM Registration Form

League/Event Registering For:
Captain's Name:
Captain's Email Address:
Captain's Phone #:
Team Name**:

\*\* The Athletics & Recreation Department reserves the right to change a team name if they deem it inappropriate. Free agents do not need to include a team name.

### TEAM ROSTER

(Please adhere to the appropriate number of players listed in the rules.)

\*\*\*All players must read and sign, in order to participate\*\*\*

By signing this form, you hereby acknowledge that you are aware of all intramural policies and procedures. In addition, you agree to uphold the student code of conduct, as outlined in the HACC student handbook. Intramural participation is open to current students and employees of HACC.

	Print Name	H #	Signature	Date
*1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

**A captain or a representative from each team must be present at the Captains' Meeting to be eligible to participate.**

Complete forms must be submitted to E-105 by the appropriate deadline.