Date: _____
Staff Initials: _____
Deposit: _____

Bucknell University
Recreation Services
Wallyball Team Entry

League (Circle One): Men's Women's Co-Rec

Division (Circle One): A (Competitive) B (Recreational)

Note: A $20.00 forfeit deposit will be due with roster

Team Name: _____

Team Captain: _____

Email: _____

Campus Mail Box: _____ Phone: _____

Preferred Game Days* (Circle All Available): Mon/Wed Tue/Thu Friday
*This will not guarantee that your league will be played on these days.
*Friday games are early afternoon only.

Cup Point Competition (Check One) □ **Pangburn** *(Greek Men)* □ **Ewan** *(Greek Women)* □ **Dean** *(Non-Greek Men & Women)*
Affiliation:_____

Conflicting Dates/Times
The Recreation Services office will make every effort to accommodate your team's schedules. However, we are limited by field/court space and the number of teams in the league. In the space provided, please list all activities that would prohibit your team from playing at a certain time (Class, work, other teams, etc). Also be sure to include the night and specific times that you are unavailable. Games will be played Monday through Thursday 5:00p.m. to 11:00p.m., and Fridays from 5:00p.m. to 7:00p.m.

_____
_____
_____
_____
_____

Important Dates To Remember:		
Captain's Meeting	**1/27/11**	**7:30 p.m.**
Rosters Due	**1/28/11**	**12:00 Noon**
Play Begins	**1/31/11**	

Bucknell University
Statement of Informed Consent

In participating in recreational sports, I recognize that certain risks and dangers exist. These risks include personal injury and the loss or damage to personal property, due to bodily collisions that are inherent in sports. I am aware that participation in this activity may include bodily contact with members of the opposite sex. I am also aware that there are specific guidelines and rules regarding this contact.

I understand that Bucknell University, it officers, employees and agents, game officials, volunteers, and all participating sponsors (hereafter "releases") shall assume no responsibility or liability for me for accident, illness or loss or damage of personal property, I acknowledge and do hereby assume all risks inherent in the use of Bucknell University's playing fields and field house and in connection with this activity, and I for myself, heirs, executors, administrators and assigns do hereby expressly release and discharge the releases from all claims, demands, liability actions or judgments of any kind weather caused by the negligence of said releases or otherwise which I now have or in the future against said releases or any of them arising out of my participation in this recreational activity.

My signature on this document certifies that my participation in the stated activities is voluntary and that I understand the risks involved in participation.

Name (print)	Signature
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____

***Participants who play without signing a roster will result in forfeiture of games in which they have played.**