UNLV IM SPORTS REGISTRATION FORM

Basketball 5V5 - Spring

ENTRY PERIOD: Priority registration ends Tuesday January 27, at the end of the SRWC Business Day.

CAPTAIN’S MEETING: The mandatory captain’s meeting will take place on Wednesday January 28, 2015 at 5pm in the SRWC Meeting Rooms.

REGISTRATION: Registration forms must be submitted to the SRWC Service desk prior to the conclusion of the registration period. Refunds will not be processed unless the event or specific sections are cancelled. Priority Registration: $50 per team

TEAM SCHEDULES: Teams must have their scheduling preferences set on their IMLeagues team page by January 29, at 9:00am. The 1st week’s game schedules will be made available no later than 5pm of Friday, January 30, 2015.

SPORT FORMAT: This sport event will be conducted in a ROUND ROBIN format with game play beginning on Monday February 2, 2015. An end of season tournament will start on March 9, 2015.

TEAM NAME:____________________________________

CONFERENCE SELECTION
THIS IS A PREFERRED SELECTION; CONFERENCES MAY BE CONSOLIDATED
Co-Rec: □ Open Men’s: □ Open □ Greek Women’s: □ Open □ Greek

MANAGER CONTACT INFORMATION (ALL INFORMATION IS REQUIRED)
PRINTED NAME:______________________________ REBEL CARD #: N__ __ __ __ __ __ __
SIGNATURE:________________________________ PHONE ( __ __ __ ) __ __ __ - __ __ __
E-MAIL ____________________________ □ @unlv.nevada.edu □ @unlv.edu □ @OTHER__________

BY SUBMITTING THIS FORM, YOU – AS TEAM MANAGER – ACCEPT ALL RULES AND POLICIES SET FORTH BY INTRAMURAL SPORTS.

REBEL CUP REGISTRATION
ORGANIZATION NAME ________________________
WRITE IN REBEL CUP ORGANIZATION IF PARTICIPATING IN THE REBEL CUP COMPETITION.
POINTS WILL NOT BE GIVEN IF AN ORGANIZATION IS NOT INDICATED.
CLASSIFICATION: □ Co-Rec □ Men’s Open □ Women’s Open
□ Men’s Greek □ Women’s Greek □ Res-Hall

COMPLETE THIS SECTION IF THE REGISTRATION PAYEE IS DIFFERENT THAN THE DESIGNATED TEAM MANAGER
PRINTED NAME: ______________________________ REBEL CARD #: N__ __ __ __ __ __ __
ADDRESS:____________________________________
CITY __________________________ ZIP __ __ __ __ PHONE ( __ __ __ ) __ __ __ - __ __ __
E-MAIL __________________________ □ @unlv.nevada.edu □ @unlv.edu □ @OTHER__________

SERVICE ATTENDANT USE ONLY

ACTIVITY: 105103

Date Paid: __/__/____ Time: ____ : ____ A / P

Amount Paid: $__________ By: □ Cash □ RebelCash □ CC _______ □ Check#________

Receipt #:______________ Employee Printed Name:______________________________