

UNLV IM SPORTS REGISTRATION FORM

Table Tennis Singles

ENTRY PERIOD: Priority registration ends **Thursday February 26, 2015** at the end of the SRWC business day.

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: **\$5 per team**



SPORT FORMAT: This sport event will be conducted in an **OPEN PLAY ROUND ROBIN** format on **Friday February 27, 2015 at 1pm** followed by a **CHAMPIONSHIP KNOCKOUT TOURNAMENT**.

ORIENTATION: The Orientation Meeting will be held on **Friday February 27, 2015 at 1pm** in the **SRWC LOBBY**. Attendance is **MANDATORY** for all players.

TEAM NAME: _____

CONFERENCE SELECTION

THIS IS A PREFERRED SELECTION; CONFERENCES MAY BE CONSOLIDATED

Open: ☐ Open

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.

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 _____

SIGNATURE _____

SERVICE ATTENDANT USE ONLY

ACTIVITY: 105203

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

SECTION: _____

Amount Paid: \$_____ By: ☐ Cash ☐ RebelCash ☐ CC _____ ☐ Check# _____

Receipt #: _____ Employee Printed Name: _____