

**PURDUE UNIVERSITY CALUMET
INTRAMURAL SPORTS
ENTRY/WAIVER FORM**

SPORT _____

TEAM NAME _____

CAPTAIN _____

PHONE # _____

TEAM ROSTER

NAME(PRINT)	SIGNATURE	PHONE #
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

As a member of the Purdue University Calumet Intramural program I am aware that I'm participating voluntarily as a member of the intramural program and that I am aware that such participation may result in possible injury and that I am assuming any risk which results from my participation. I do hereby agree to hold harmless Purdue University Calumet, its trustees, officers, appointees, agents and employees from all losses that may arise from injury, damage or death, while participating in the activities of the intramural program

****FIGHTING POLICY: THERE WILL BE NO FIGHTING. ANYONE WHO STARTS A FIGHT WILL BE BANNED FROM INTRAMURALS & THE TFC FOR 1 YEAR AND WILL BE TURNED OVER TO THE DEAN OF STUDENTS. NON-STUDENTS WILL BE TURNED OVER TO THE UNIVERSITY POLICE.**