VILLANOVA INTRAMURAL SPORTS
TEAM ROSTER
PLEASE TYPE ROSTER FORM
SPORT: _____________________________
Please Circle:   Men’s    Women’s    Co-ed

Team Name: ________________________________________

Captain’s INFORMATION ~
Name*: ________________________
Phone #: ________________________
E-mail: _________________________
2nd Captain? – place a “C” next to their name (by list #) and include their email here ___________________________

PLEASE LIST PLAYER NAMES AS IT APPEARS ON THEIR WILDCARD
PLAYER (indicate club sport members with: *) PHONE# BANNER ID# CLASS
(PLEASE LIST PLAYER NAMES AS IT APPEARS ON THEIR WILDCARD) (FR, SO, JR, SR, GR, F/S)
1. __________________________________________________________________________
2. __________________________________________________________________________
3. __________________________________________________________________________
4. __________________________________________________________________________
5. __________________________________________________________________________
6. __________________________________________________________________________
7. __________________________________________________________________________
8. __________________________________________________________________________
9. __________________________________________________________________________
10. __________________________________________________________________________
11. __________________________________________________________________________
12. __________________________________________________________________________
13. __________________________________________________________________________
14. __________________________________________________________________________
15. __________________________________________________________________________
16. __________________________________________________________________________
17. __________________________________________________________________________
18. __________________________________________________________________________
19. __________________________________________________________________________
20. __________________________________________________________________________

This Roster WILL NOT be accepted unless it is completely filled out.
FORFEIT FEES and PARTICIPANT WAIVERS must accompany the TEAM ROSTER
in order to be accepted.
Every team member must fill out their own waiver, for each team, the waiver must be hand written and signed
Please CIRCLE two days that would be most convenient for your team to play. Please ONLY CIRCLE ONE weekend day (Sunday only) and one weekday from Monday- Thursday. We would like to help fit your schedule! However, due to the large number of teams and limited facility space we may not be able to accommodate your request. Scheduling of Intramural contests is subject to the Intramural Office staff.

SUNDAY        MONDAY        TUESDAY       WEDNESDAY       THURSDAY       FRIDAY        SATURDAY

Remember that weekday games for Basketball are played from 6 - 12:00 AM. Pick your days accordingly.
Basketball weekend games are played from 10:00AM – 12:00AM.

***NOTE: We recommend adding at least 3-4 more players than the required minimum***