Trine University

Intramural Indoor Volleyball Roster Sign Up

Captain Name:	Alternate Captain Name:

Team Name:

Captain Email:	Alternate Captain Email:

Captain Phone Number:	Alternate Captain Phone Number:

Roster Names (<u>Please have all members sign for waiver</u>)-minimum of 4 to play

Name	Signature	Name	Signature

Time Preferred (check all that apply):

7pm-8pm____ 8pm-9pm____ 9pm-10pm____ 10pm-11pm____

WAIVER: Participation in all recreational sports programs including Intramural Sports activities are on a voluntary basis. Trine University shall not be liable for any injuries, damages, or other such losses, which individuals may incur while participating in any recreational programs. Individuals assume all risk of injuries, damages or other such losses while using any equipment or facilities at Trine University, or while participating in any program or activity at Trine University, or on the Trine University premises. Participants waive any and all claims against Trine University; it's trustees, officers, agents and employees for such injuries, damages or other losses. Must sign waiver to participate.