

Rensselaer Redhawk Open League Sports Roster

Fall/Spring Event: _____ League: _____

Team Name: _____

Captain: _____

Co-Captain: _____

Phone #: _____

Phone#: _____

Email: _____

Email: _____

Important Note: Each week the intramural department has certain hours dedicated to be used by Intramural Sports. Please make every effort to have your team at your scheduled event.

Indicate with an "X" the times your team can play below.

	Monday	Tuesday	Wednesday	Thursday		Sunday
5pm						12pm-2pm
6pm						2pm-4pm
7pm						4pm-6pm
8pm						6pm-8pm
9pm						8pm-10pm
10pm						After 10pm

****Please Type or Print Legibly with Ink****

	Name	RIN Number	Phone Number	Email
1				
2				
3				
4				
5				
6				
7				
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9				
10				
11				
12				
13				
14				
15				

****This Roster Form Will Not be Accepted if Not Fully Completed.****