

Intramural Sports  
Free Agent Entry Form



Loyola Marymount University  
Department of Campus Recreation

Sport: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

M/F: \_\_\_\_\_

Fr/So/Jr/Sr/Grad or F/S: \_\_\_\_\_

Please circle correct division:

MEN  WOMEN  CO-REC **\*\*Open League\*\***

FRAT.  SORORITY **\*\*Greek League\*\***

CO-REC **\*\*Residence Hall League\*\***

UPPER  LOWER **\*\*Men's Basketball Only\*\***

**\*\*\* TO BE ELIGIBLE FOR PLAY, YOU MUST SIGN THE WAIVER ON THE BACK OF THIS FORM\*\*\***  
**\*\*\* PLAYERS MAY ONLY PARTICIPATE ON ONE MEN'S/ WOMEN'S TEAM AND ONE CO-REC TEAM\*\*\***

**Check one:**  I would like to be contacted directly by other players and I authorize Campus Rec to post my contact information.  
 I would like to be contacted by Campus Rec personnel only. Please keep my contact information confidential.

**IF YOU WOULD LIKE TO BE PLACED ON THE SAME TEAM AS ANOTHER PLAYER, PLEASE LIST HIS/HER NAME HERE.**

**Loyola Marymount University**

**INTRAMURAL TEAM/INDIVIDUAL/DUAL SPORT WAIVER FORM**

BASKETBALL, SOCCER, TABLE TENNIS, TENNIS, 3 POINT SHOOT-OUT, SLAM DUNK, ALL-STAR GAME, INNERTUBE WATERPOLO, WHIFFLE BALL, ULTIMATE FRISBEE, VOLLEYBALL, SOFTBALL, FLAG FOOTBALL, INDOOR SOCCER, PUNT, PASS & KICK COMPETITION, 40 YARD DASH, HOMERUN DERBY, DODGEBALL

I, the undersigned, am participating in the Loyola Marymount University Intramural **TEAM/INDIVIDUAL/DUAL SPORT** program. I acknowledge that Loyola Marymount University is providing me with an optional recreational opportunity. I understand that it is a privilege, not a right, to participate in such activities.

I acknowledge and fully understand that I will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses including damage to or loss of personal property which might result not only from my own and others actions, inactions or negligence, the rules of play, or the condition of the premises or of any equipment used and there may be other risks not known to me or not reasonably foreseeable at this time.

In consideration of my request and permission to participate in the **TEAM/INDIVIDUAL/DUAL SPORT** program, I hereby assume full responsibility of all risk of injury, damages or loss, which may result from my participation in this activity. I further agree to hold Loyola Marymount University, its agents, volunteers and employees harmless from any claims or liabilities arising from or relating to such injury or loss.

I acknowledge by signing this waiver form that I am currently adequately covered by appropriate health and accident insurance, have had a medical examination and acknowledge that I would not normally be adversely affected by participating in the aforementioned activity.

The undersigned has read and understands this agreement and realizes it relates to surrendering and releasing valuable legal rights and does so freely and voluntarily.

NAME	SIGNATURE	UNIVERSITY ID #	DATE
_____	_____	_____	_____