



City: _____ State: _____ Zip: _____

Please print player's names; Roster limit – 15 for Men's and Women's teams, 16 for Co-Rec teams

Player	Participant Name (please print)	Participant Signature	Student ID #	Completed by Registrar Fall 2018: Semester or Quarter	
				UG or GR	# of Credits
1				UG/GR	
2				UG/GR	
3				UG/GR	
4				UG/GR	
5				UG/GR	
6				UG/GR	
7				UG/GR	
8				UG/GR	
9				UG/GR	
10				UG/GR	
11				UG/GR	
12				UG/GR	
13				UG/GR	
14				UG/GR	
15				UG/GR	
16*				UG/GR	

Place institution's
seal here