



**2016 NIRSA Regional Flag Football
University of Florida
November 4-6, 2016
Tournament Registration Form**



Institution: _____ Enrollment: _____
 Team Name: _____ Division (circle one): Men's Women's Co-Rec
 Team Rep: _____ Email Address: _____
 Address: _____ Phone: _____
 City: _____ State: ____ Zip: _____

NIRSA recognizes and celebrates the transgender student population among its tournament players and encourages students to participate in intramural sports and sport club divisions based on their expressed gender identity.

All participants must comply with the [NIRSA Championship Series eligibility guidelines](#). Players with questions about their eligibility or who have need for additional support are encouraged to contact the NIRSA Director of National Sport Programs [Valerie McCutchan](#).

By signing this statement of eligibility understanding, I _____ (name of Campus Recreation representative), have conferred with the team captain to attest that each member of this roster has not already appeared on six NIRSA Regional/National Tournament rosters. All names listed on this roster should meet all NIRSA Championship Series eligibility guidelines.

 Email: _____ Phone: _____
 Signature of **Campus Recreation representative** approving team entry

Incomplete forms or entries submitted without an entry form, entry fee, or Campus Recreation representative signature will NOT be accepted. An original player certification form with your institutions Registrar's seal must be received by the entry deadline of November 1st.

Please list players in ascending order by jersey number; Roster limit – 15 for Men's and Women's teams, 16 for Co-Rec teams

Player	Jersey #	Participant Name	Former Collegiate Varsity Player	Listed on varsity/NIRSA roster prior to Fall 2005	For the purposes of participation in the NIRSA Championship Series, I identify as a:	Email Address
1			YES / NO	YES / NO	MAN/WOMAN	
2			YES / NO	YES / NO	MAN/WOMAN	
3			YES / NO	YES / NO	MAN/WOMAN	
4			YES / NO	YES / NO	MAN/WOMAN	
5			YES / NO	YES / NO	MAN/WOMAN	
6			YES / NO	YES / NO	MAN/WOMAN	
7			YES / NO	YES / NO	MAN/WOMAN	
8			YES / NO	YES / NO	MAN/WOMAN	
9			YES / NO	YES / NO	MAN/WOMAN	
10			YES / NO	YES / NO	MAN/WOMAN	
11			YES / NO	YES / NO	MAN/WOMAN	
12			YES / NO	YES / NO	MAN/WOMAN	
13			YES / NO	YES / NO	MAN/WOMAN	
14			YES / NO	YES / NO	MAN/WOMAN	
15			YES / NO	YES / NO	MAN/WOMAN	
16*			YES / NO	YES / NO	MAN/WOMAN	

*Co-Rec teams only

Coaches: _____

Entry Fee*: Early Bird Rate: **\$225 (paid by 10/24)** Full Registration: **\$300 (paid by Nov 1st)** Special Olympics: **\$225**

Payment Options: Check (Payable to **University of Florida**) Credit Card: (email JennaN@RecSports.ufl.edu for Instructions)

Final Entry Deadline: Received by: November 1st 2016

Send Completed Forms to: JennaN@RecSports.ufl.edu or Fax to 352-392-3404

*Non-refundable, unless entry into the tournament is denied. In the event that the tournament is cancelled due to circumstances beyond control, entry fees will not be refunded.