



2015 NIRSA Regional Basketball Tournament
University of Dayton
February 27th – March 1st 2015
Tournament Registration Form



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

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 Championship Series 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 February 13th.

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

Player	Jersey #	Participant Name	Former Collegiate Varsity Player	Listed on varsity/NIRSA roster prior to Fall 2005	Email Address
1			YES / NO	YES / NO	
2			YES / NO	YES / NO	
3			YES / NO	YES / NO	
4			YES / NO	YES / NO	
5			YES / NO	YES / NO	
6			YES / NO	YES / NO	
7			YES / NO	YES / NO	
8			YES / NO	YES / NO	
9			YES / NO	YES / NO	
10			YES / NO	YES / NO	
11			YES / NO	YES / NO	
12			YES / NO	YES / NO	
13			YES / NO	YES / NO	
14			YES / NO	YES / NO	
15			YES / NO	YES / NO	

Coaches: _____

Entry Fee*: First 20 NIRSA Institutional Member teams to register and pay: \$275 All other teams: \$325

Payment Options: Check (Payable to **University of Dayton Campus Recreation**)
 Credit Card #: _____ Type of Card _____ Expiration date: _____ Security Code: _____

Entry Deadline: Received by: Friday, February 13th **Entry Status Notification:** Teams will be emailed by February 16th

Send Completed Forms to:
Matt Ferdinand
University of Dayton Campus Recreation
300 College Park
Dayton, OH 45469-0790
Email: mferdinand1@udayton.edu
Phone: 937-229-2709

*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.