



RECREATION & INTRAMURAL SERVICES

SUMMER 2008

FLOOR HOCKEY
Session 1
June 3rd – July 1st

CLARK HALL

Conference	Division	Time	League	# of Teams
Tuesday	Men's A	6:30 – 9:30pm	Carefree	6 Teams
Tuesday	Men's B	9:30 – 12:30am	Advance	6 Teams

For a complete listing of Division and League descriptions, visit our web site at:

www.ubrecreation.com

All games will be held at the Clark Hall Gymnasium on the Main Street Campus.

TO REGISTER: Submit the \$40.00 guarantee of appearance deposit, signed team captain's declaration, and completed roster form to the Recreation Office, 130 Alumni Arena.

Faculty/staff/community members must have an annual permit valid through Aug., 15, 2008; a semester permit valid through Aug., 25, 2008 or a summer intramural sports permit. (Go to the Recreation Office, 130 Alumni Arena for details)

Roster submission deadline is 7:00 PM, Friday, May 23, 2008

INTRAMURAL team deposit REFUNDS must be picked up:

**MONDAY, AUG., 11, 2008 through FRIDAY, AUG., 22, 2008
(EXCLUDING SATURDAY & SUNDAY)
9:30AM – 4:00PM**

OFFICE USE ONLY

Date Paid: _____

Receipt #: _____

Initials: _____

*** Refunds after the last date for pickup, cannot, under any circumstances, be returned!!

*** Refunds will only be returned upon presentation of **ORIGINAL RECEIPT!**

UNIVERSITY AT BUFFALO
INTRAMURAL SPORTS SERVICES

TEAM DEPOSIT, REFUND and AWARD POLICY

TEAM DEPOSIT

The \$40.00, Guarantee of Appearance, per team, deposit represents the team's commitment to appear on time at all games. The team representative will be given a receipt that will indicate a refund pickup period. The ORIGINAL RECEIPT MUST be presented when picking up a refund.

TEAM REFUND AND REFUND PICKUP PERIOD

Of the \$40.00 submitted for Conference entry, \$30.00 is used for Officials and championship awards. \$10.00 is returned provided the team has fulfilled their scheduled obligations of appearing on time at all games. If a team fails to appear for one game, they receive one forfeit. A team that forfeits one game will lose \$5.00 of its refund. If the same team forfeits a second game, no refund will be issued.

TEAM AWARDS

League Champions receive awards. Awards are limited to the number of individuals on the roster up to a maximum of TEN (10).

THE INTRAMURAL SPIRIT OF PLAY

"Team sport activities find their origin in the basic human need for the spirit of play. Winning and losing are mere outcomes of this play spirit. Abusive language towards officials and manipulation of the rules are "not part of the game." What is part of the game is the pure satisfaction of participation, getting fit and enhancing friendships. Without your opponent, you have no game, no contest, and no fun. You are indebted to them, as they are to you. The spirit of play then is based on cooperation. Upholding high standards of integrity and fair play acknowledges this idea of cooperative play. All players are encouraged to exercise good judgment in caring for the safety of others as well as themselves. At the University at Buffalo an intentional foul is considered cheating and a gross offense against the spirit of play. The goal of lifetime sports for all players may have more meaning than that of a win or loss, the memory of which often fades quickly. All players are asked to participate within the context of this spirit of play."

Important Contact numbers:

Michelle Bernas – Assistant Director for Intramurals – 716-645-6149
Intramural Sports hotline – 716-645-3148

Important Dates to remember:

Registration Deadline -- Friday, May 23, 2008 @ 7:00pm at the Recreation Office, 130 Alumni Arena
Floor Hockey Captain's Meeting – Tuesday, May 27, 2008 @ 5:30pm in the Bull Pen in Alumni Arena
Regular Season Play begins – Tuesday, June 3, 2008 @ Clark Hall
Roster Additions – Must be done before the start of the third game
Deposit Refund Dates – Monday, August 11 – Friday, August 22, 2008 (EXCLUDING Saturday and Sunday)

Summer Floor Hockey Roster - Team Name: _____

PLAYERS NAME		ORG. #	PERSON # / SUMMER INTRAMURAL PERMIT #
Captain's Name: _____ Phone#: _____ E-mail address: _____	M/F		
Captain's Name: _____ Phone#: _____ E-mail address: _____	M/F		
3.	M/F		
4.	M/F		
5.	M/F		
6.	M/F		
7.	M/F		
8.	M/F		
9.	M/F		
10.	M/F		

Each player's name on the roster must be accompanied with a valid ID. **NO EXCEPTIONS!** Valid ID numbers are; Current UB Student, Faculty/Staff/Community Person numbers and Summer Intramural Permit numbers. **ID's WILL BE CHECKED AT EACH GAME.**

**** ORGANIZATION NUMBER:** In the column designated "Org. Number" place the appropriate number that represents a particular player. UNDERGRADUATES are (1) DUE, (2) GSA, (3) MED, (4) Grad. Management, (5) DENT, (6) MFC, (7) PHARM, (8) LAW, (9) Faculty/Staff/Community

Teams have until the start of their **THIRD** game to solidify their roster, adding player's full name, organization number and ID number. I endorse the Conferences and Divisions herein. Changes will invalidate this form.

CAPTAIN'S SIGNATURE: _____

FOR OFFICE USE ONLY:

DATE PAID: _____ RECEIPT NUMBER: _____ STAFF INITIALS: _____

UNIVERSITY AT BUFFALO ~ INTRAMURAL SERVICES
TEAM CAPTAIN'S DECLARATION

FLOOR HOCKEY

TEAM NAME: _____

Captain's Declaration:

- I have read and understand the University at Buffalo's intramural Eligibility rules.
- I fully understand that if the above mentioned team should use an illegal player, then I, as well as the rest of my team, assume the technical ramifications of that action.
- I will join and encourage my team members to join the softball listserv in order to receive all up to date league information.
- Attend or send a team representative to attend the pre-season captain's meeting, **Tuesday, May 27, 2008 @ 5:30pm in the Bull Pen in Alumni Arena**. Important information is given out at this meeting.
- Provide accurate names, phone numbers and email addresses so the Assistant Director for Intramurals can communicate properly any and all changes with you.
- Inform my team members that ID's are required at the start of games. NO ID MEANS NO PLAY.
- Ensure team members arrive on time to all games.
- GAME TIME IS FORFEIT TIME. There is NO GRACE PERIOD.
- I fully understand that the refundable part of my deposit **must be picked up within the refund period** in the semester which my team participated. **I MUST PRESENT MY ORIGINAL RECEIPT TO RECEIVE MY REFUND.**
- I understand the Intramural Team Deposit, Refund Policy (READ THE ATTACHED SHEET BEFORE SIGNING THIS DOCUMENT.).

I do hereby, for my heirs, executors and administrators, waive, release and forever discharge any and all claims for damages which my team has or which may hereafter occur to said team or team members in connection with our association or entry out of our participation in said event.

Office Use Only

Division of Play (Check One)

Tuesday Men's Carefree A	Tuesday Men's Advance B
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CAPTAIN'S NAME (PRINTED): _____

CAPTAIN'S NAME (SIGNED): _____ DATE: _____