

APG INTRAMURAL SPORTS PROGRAM

LETTER OF INTENT

1. Organization: _____ will enter a team in the _____
(year)

Intramural _____ program.
(sport)

Fee: _____

Date Paid: _____

Date of Roster Submittal: _____

Team Name: _____

Primarily:
(circle one)

Mil

Civ

Con

2. Coach of the team will be:

Name: _____ Grade: _____

Phone: _____ (c): _____ Fax: _____

E-mail: _____

2. Another POC of the team will be:

Name: _____ Grade: _____

Phone: _____ (c): _____ Fax: _____

E-mail: _____

2. Another POC of the team will be:

Name: _____ Grade: _____

Phone: _____ (c): _____ Fax: _____

E-mail: _____

3. Name and grade _____ will represent this unit at the organization meeting and rules clinic. Time, date and location of all meetings are listed on the sports calendar.

APG Athletic Center :410-278-7933/7934

Hoyle Gymnasium:410-436-3375

MWR Sports: usarmy.APG.imcom-fmwrc.list.usag-mwr-sports@mail.mil