

2025 NIRSA Regional Basketball University of Colorado - Boulder - March 7-9, 2025 **Player Certification Form**

College/University Name:	
Team Name:	Division (circle one): Men's Women's Co-Rec Unified
Team Rep Name:	Team Rep Email Address:
Address:	Team Rep Phone:
City: State: Zip:	
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. This original player certification form with your institutions Registrar's seal must be received by the entry deadline of November 4th, 2024.

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

Player	Player Participant Name (please print)	Participant Signature	Student ID #	Completed by Registrar SPRING 2025: 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		

*Co-Rec teams only

To be completed by Registrar's Office

# of credit hours required by your institu Please place your institution's seal of cer			
information on this form.			Place institution's
By drawing a line under the last participant verified and by signing below, I certify (#) students listed above are currently enrolled for the listed number of c			seal here
Signature	Date	Phone	