

UC-Merced Sport Club Team Event Schedule

Date: _____ Club: _____

Please type or print neatly.

1. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

2. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

3. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

4. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

5. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

6. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

7. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

8. Date: _____ Event/Opponent: _____

Location: _____ Time: _____

Please attach additional sheet if necessary. This form is due to the Club Sports office within 10 days of any change.