

**DEPARTMENT OF THE ARMY
UNITED STATES ARMY GARRISON AND FORT HAMILTON
SPORTS & FITNESS CENTER
402 MAC ARTHUR ROAD
BROOKLYN, NY 11252**

IMHA-MWR-G

October 7, 2017

MEMORANDUM FOR FORT HAMILTON SPORTS AND FITNESS CENTER

SUBJECT: LETTER OF INTENT FOR – INTRAMURAL BASKETBALL

1. This unit _____ circle: will / will not participate in the 2017-2018 unit Level Intramural Basketball (Teams will consist of a maximum 12 players.)

a. Intramural Basketball is scheduled to begin December 4, 2017 and conclude in March 2018. The following championship programs will commence as follows:

2. Our (coach) point of contact will be: (please print name and can be reached at the following number (s). Alternate name below: work number/ cell number

Coach Name: _____
Address: _____
City, NY, Zip: _____
Cell Phone: _____ **Office:** _____ **Home:** _____
E-mail Address: _____

Alternate Name: _____
Cell Phone: _____ **Office:** _____ **Home:** _____
E-mail Address: _____

3. Based on our projected duty commitments, we will be unable to play on the following dates during Intramural Basketball. Mission commitments entry filled by Unit Commander. All military teams must submit a copy of their Training Schedule, Team Roster and a sign copy of the Waiver and Release of Liability Form for each player on Teams Roster. All Civilian will submit Team Roster, NCIC III Background Check and Waiver and Release of Liability Form for each player on before each game.

4. We acknowledge and understand that there will be mandatory coaches and official's clinic meeting tentatively scheduled for Wednesday, November 29, 2017. It will be held at the Fort Hamilton Fitness Center Gymnasium at 1800. If the coach cannot attend a representative will be there from the unit. The season schedule and memorandum of Instruction (MOI) will be given out during this meeting. Submit your Letter of Intent to your Sports Office NLT November 22, 2017.

**5. Point of contact is Peter Luthi at DSN 2-4727 or commercial (718) 630-4727,
E-mail: peter.j.luthi.naf@mail.mil**

Commander Signature/Date
Commander Name: _____
Office/Cell Number: _____
E-Mail Address: _____

If you want to merge with another team, remember the troop strength between the teams that are merging cannot exceed to 150 personnel. Plus a signature must also be obtained from the merging team's commander along with a copy of the alpha roster from each unit in question.