

Team Name _____

Official Team Roster Form

Age Group _____

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
1	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	
	Father or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
2	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	
	Father or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
3	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	
	Father or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
4	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	
	Father or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #	E-mail	

Managers Signature

Team Name _____

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#	Last Name	First Name	D.O.B.	Address	City	State	Zip
5	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
6	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
7	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
8	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

Managers Signature _____

Team Name _____

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Age Group _____

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
9	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
10	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
11	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

#	Last Name	First Name	D.O.B.	Address	City	State	Zip
12	Mother or Legal Guardian						
	Last Name	First Name		Home Phone #	Cell Phone #		E-mail
	Father or Legal Guardian						
Last Name	First Name		Home Phone #	Cell Phone #		E-mail	

Managers Signature _____

Team Name _____

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13	#	Last Name	First Name	D.O.B.	Address	City	State	Zip	
	Mother or Legal Guardian								
	Last Name	First Name	Home Phone #			Cell Phone #		E-mail	
Father or Legal Guardian									
Last Name	First Name	Home Phone #			Cell Phone #		E-mail		

14	#	Last Name	First Name	D.O.B.	Address	City	State	Zip	
	Mother or Legal Guardian								
	Last Name	First Name	Home Phone #			Cell Phone #		E-mail	
Father or Legal Guardian									
Last Name	First Name	Home Phone #			Cell Phone #		E-mail		

15	#	Last Name	First Name	D.O.B.	Address	City	State	Zip	
	Mother or Legal Guardian								
	Last Name	First Name	Home Phone #			Cell Phone #		E-mail	
Father or Legal Guardian									
Last Name	First Name	Home Phone #			Cell Phone #		E-mail		

Assistant Coach #1				Address		City	State	Zip
Last Name	First Name	Home Phone #			Cell Phone #		E-mail	

Assistant Coach #2				Address		City	State	Zip
Last Name	First Name	Home Phone #			Cell Phone #		E-mail	

Managers Signature