

TOURNAMENT ROSTER FORM:

Team Name _____

Age Division _____ Gender: Boys _____ Girls _____

Coach or Contact Person _____

Phone # (H) _____ (W) _____ (C) _____

E-mail: _____ Fax# _____

TEAM ROSTER (Print or Type)

	Name	Jersey#	DOB	Grade
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Must be signed by the Head Coach:

I certify that the information provided on this roster form is correct, and that each player meets all eligibility requirements. I have read the rules of the tournament, and I agree to abide by them and require my players and assistants to do so as well.

Signature: _____