



Official Youth Team Roster

Name of Team: _____
 Name of Coach: _____ Phone: Day: _____ Evening: _____
 Address: _____
 Name of Asst. Coach: _____ Phone: Day: _____ Evening: _____
 Address: _____

Session: _____
 Division: _____
 Sport: _____

<i>Name</i>	<i>Address</i>	<i>Phone</i>	<i>Date of Birth</i>
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 Signature of Coach

If a team has more than 18 players, please request a second roster.