



# TEAM ROSTER



Team Name/Entry Name \_\_\_\_\_ Event Name \_\_\_\_\_

Division Name \_\_\_\_\_ Number of Participants \_\_\_\_\_

Please copy this form and use one for each registered team. List all participants competing in the division listed above. Any participant not listed on your Team Roster will not be allowed to compete. Please indicate the division name for any participant competing as a crossover and mark the appropriate box.

Participant Name	Age as of Aug 31, 2009	Gender M/F	Check if Crossover	Division Crossing Over From	Jacket Size
1. _____	_____	_____	<input type="checkbox"/>	_____	_____
2. _____	_____	_____	<input type="checkbox"/>	_____	_____
3. _____	_____	_____	<input type="checkbox"/>	_____	_____
4. _____	_____	_____	<input type="checkbox"/>	_____	_____
5. _____	_____	_____	<input type="checkbox"/>	_____	_____
6. _____	_____	_____	<input type="checkbox"/>	_____	_____
7. _____	_____	_____	<input type="checkbox"/>	_____	_____
8. _____	_____	_____	<input type="checkbox"/>	_____	_____
9. _____	_____	_____	<input type="checkbox"/>	_____	_____
10. _____	_____	_____	<input type="checkbox"/>	_____	_____
11. _____	_____	_____	<input type="checkbox"/>	_____	_____
12. _____	_____	_____	<input type="checkbox"/>	_____	_____
13. _____	_____	_____	<input type="checkbox"/>	_____	_____
14. _____	_____	_____	<input type="checkbox"/>	_____	_____
15. _____	_____	_____	<input type="checkbox"/>	_____	_____
16. _____	_____	_____	<input type="checkbox"/>	_____	_____
17. _____	_____	_____	<input type="checkbox"/>	_____	_____
18. _____	_____	_____	<input type="checkbox"/>	_____	_____
19. _____	_____	_____	<input type="checkbox"/>	_____	_____
20. _____	_____	_____	<input type="checkbox"/>	_____	_____

I confirm that all information listed above is accurate and that all participants listed on this Team Roster are registered in the correct division. Proof must be available upon request.

Coach's Signature \_\_\_\_\_ Date \_\_\_\_\_



# TEAM ROSTER



Team Name/Entry Name \_\_\_\_\_ Event Name \_\_\_\_\_

Division Name \_\_\_\_\_ Number of Participants \_\_\_\_\_

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Participant Name	Age as of August 31, 2009	Gender M/F	Check if Crossover	Division Crossing Over From	Jacket Size
21. _____	_____	_____	<input type="checkbox"/>	_____	_____
22. _____	_____	_____	<input type="checkbox"/>	_____	_____
23. _____	_____	_____	<input type="checkbox"/>	_____	_____
24. _____	_____	_____	<input type="checkbox"/>	_____	_____
25. _____	_____	_____	<input type="checkbox"/>	_____	_____
26. _____	_____	_____	<input type="checkbox"/>	_____	_____
27. _____	_____	_____	<input type="checkbox"/>	_____	_____
28. _____	_____	_____	<input type="checkbox"/>	_____	_____
29. _____	_____	_____	<input type="checkbox"/>	_____	_____
30. _____	_____	_____	<input type="checkbox"/>	_____	_____
31. _____	_____	_____	<input type="checkbox"/>	_____	_____
32. _____	_____	_____	<input type="checkbox"/>	_____	_____
33. _____	_____	_____	<input type="checkbox"/>	_____	_____
34. _____	_____	_____	<input type="checkbox"/>	_____	_____
35. _____	_____	_____	<input type="checkbox"/>	_____	_____
36. _____	_____	_____	<input type="checkbox"/>	_____	_____

I confirm that all information listed above is accurate and that all participants listed on this Team Roster are registered in the correct division. Proof must be available upon request.

Coach's Signature \_\_\_\_\_ Date \_\_\_\_\_