AMATEUR ATHLETIC UNION AAU WEST COAST BOYS' BASKETBALL CHAMPIONSHIP

Form **B**



OFFICIAL TEAM ROSTER



TEAM NAME

____AAU DISTRICT_____ DIVISION

DISTICT ROSTER – NOT TO EXCEED 12 PLAYERS

JERSEY # White/Dark	TYPE NAME NAME (LAST, FIRST)	AAU MEMBERSHIP # s	HEIGHT	BIRTH DATE	Cross Boundary Athlete		GRADE EXCEPTION YES/NO		Office use only
1. /					Y	N	Y	N	
2. /					Y	N	Y	N	-
3. /					Y	N	Y	N	-
4. /					Y	N	Y	N	-
5. /					Y	N	Y	N	-
6. /					Y	N	Y	N	-
7. /					Y	N	Y	N	-
8. /					Y	N	Y	N	-
9. /					Y	N	Y	N	-
10. /					Y	N	Y	N	
11. /					Y	N	Y	N	-
12. /					Y	N	Y	N	-

LIST THE THREE (3) NON-PLAYERS THAT ARE ALLOWED ON BENCH:

HEAD COACH:	MEMBERSHIP #	
Assistant Coach	MEMBERSHIP #	
Assistant Coach	MEMBERSHIP #	
Only Three (3) Non players allowed in the Bench area		

Non players allowed in the Bench area

Mail this form with the entry fee and Form A to: YVSA, P O Box 9603, Yakima, Washington 98909 All information on the event can be found on the web site www.ieaau.org

Teams must have the birth records and waivers for each of the Players at registration. Grade Exception forms must be presented at registration for any players that meet the grade exception rule. Only three grade exception per team 14 and Under/8th grade and below.

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT							
CONTACT INFORMATION	e of Head Coach)						
Name:							
ADDRESS:	CITY	STATE	ZIP				
PHONE (H)	(W)	FAX					
CELL/PAGER	EMAIL						