

TEAM ROSTER FORM



Division: U-_____

Team Name: _____

Coach/Team Manager Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home: _____ Work: _____ Cell: _____

E-mail: _____

#	Player Name	Jersey Number	Date of Birth
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

** Official NCSL roster may be used in lieu of this form. (If you have guest players, please add their names to the bottom of the NCSL roster or use this form for the guest players.)*