



ROSTER State Cup Regional Cup League Tournament

Name of Team	Affiliate/Club Name	Age Group	Competition	Seasonal Yr.
			Boys Girls	-

Signature of Coach:	Date	Signature of State Official:	Date
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Head Coach			Assistant Coach/Manager		
Street Address			Street Address		
City/State/Zip Code			City/State/Zip Code		
Phone	Fax	Business Phone	Phone	Fax	Business Phone

District - Club/Team - Number - League

Colors: Jersey _____ Shorts _____ Socks _____
 Alt. Jersey _____ Shorts _____ Socks _____

	NAME (Last, First, MI)	Player Pass #	D.O.B. Mo/Day/Yr	Jersey #	Alt. #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					