



LBSA Protected Player List

Team: _____ Age Division: _____

Head Coach: _____ Phone: _____

Email: _____

My protected players are:

Parent Approval (Signature)

1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____
11 _____	_____
12 _____	_____