2021 FALL KICK-OFF CLASSIC ROSTER

You must email electronic copies of this form along with electronic copies of each player's signed player liability release form.

Team type (circle one):

Girls Grade 7/8 Girls Grade 5/6 Girls Grade 3/4 Girls Grade 2

Boys Grade 7/8 Boys Grade 5/6 Boys Grade 3/4 Boys Grade 2

Team:_____Town: _____

Coach:_____Uniform Colors: _____

Player Name (Last, First)	Jersey Number	Phone	Date of Birth
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			

I attest the above information is true and correct, I also agree to abide by the rulesand regulations of the tournament.

_____ _____ _____

Coach Signature Address Phone

Travel Coordinator or Town Registrar Signature: _____