TEAM ENTRY SHEET

List Goalies First

THESE NAMES WILL APPEAR IN OUR PROGRAM BOOKLET - check your spelling

Team:_____

SW. #		FIRST NAME (print CLEARLY)	LAST NAME	DATE OF BIRTH MM / DD / YY
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COACHING STAFF ONLY - PRINT NAMES CLEARLY

Coach_____Coach Cert.#_____

Ass. Coach_____

Ass. Coach_____

Trainer_____Trainer Cert.#_____

Manager_____

Information on this form is for internal use ONLY. **THIS COMPLETED SHEET MUST BE FORWARDED WITH COMPLETED ENTRY FORM, A COPY OF OFFICIAL ROSTER AN PAYMENT IN FULL. TRAVEL PERMIT (if applicable) CAN BE FORWARDED WHEN IT BECOMES AVAILABLE.**

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