



CUSA Recreational HS 2010 Fall Team Roster

Season: 2010 -Fall Division: _____

Name of Team: _____

Name of Coach: _____ Phone Number (Home) _____ (Cell) _____

Address: _____ City _____ State _____ Zip Code _____

Team Contact: _____ Phone No (Home) _____ (Cell) _____

Address: _____ City _____ State _____ Zip Code _____

Coach Email: _____ Team Contact Email: _____

List players in alphabetical order by last name first

Player #	Player	Address	Phone	Birthdate	M or F	Grade
1						1
2						2
3						3
4						4
5						5
6						6
7						7
8						8
9						9
10						10
11						11
12						12
13						13
14						14
14 Player Roster – Minimum required for complete team						
15						15
16						16
17						17
18						18
18 player roster – Max allowed w/o League approval						
19						19
20						20
21						21
22						22

I Hereby Certify That the Above Information Is True and Correct

(SIGNATURE OF COACH OR MANAGER) (DATE)

(SIGNATURE OF CUSA Registrar) (DATE)