2024 TEAM ROSTER



LEAGUE	
MANAGER	
COACH	
СОАСН	
SCOREKEEPER	
BAT PERSON	

- \* PHONE NUMBER:
- \* EMAIL ADDRESS:

				DATE OF	PROOF OF
	PLAYER'S NAME	UNIFORM#	AGE	BIRTH	AGE
1_					
2_					
3_					
4					
11_					
12_					
13_					
	Tournament Entry Fee <u></u>	Che	СК#		

\* **REQUIRED**