

Mid -Atlantic Cup
Team Roster Form – For Recreation Teams

(Teams who have received official rosters from their clubs must use that roster)



Age Group (check):

U7	U8	U9	U10	U11
U12	U13	U14	U15	U16
U17	U18	U19		

Gender (check): Boys Girls Coed

Team Name: _____

Coach Information	
Name:	
Address:	
City, State, Zip:	
Phone: (H)	(C)
Email:	

Player List		
Name	Jersey Number	Date of Birth
1.		
2.		
3.		
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