WYSA 3v3 Tournament 2022 Roster

Town Name:	Team Name:
Age Group:	Gender:
Head Coach:	Cell Phone:
Asst. Coach:	Cell Phone:
Shirt Color	Shorts Color:

	Jersey #	First Name	Last Name	Birth Date D/M/Y	MR
1					
2					
3					
4					
5					
6					

Instructions:

• This must be completed and turned in by Saturday, July 17.

• Player Medical Release Waiver Forms are required for ALL Players and must be submitted with this completed roster.