South Dakota A Baseball Program

2018 SDB Player Roster Form # 1B

☐ 16 under Division ☐ 14 under Division ☐ 13 under Division ☐ 13/14 Combined Division

☐ 12 under Division ☐ 11 under Division ☐ 10 under Division ☐ 9 under Division

Team Name: _____ Coach or Manager Name: _____

Team Sponsor: _____ City and State: _____

TeamCertification: ☐ By checking here, I as team coach or manager hereby certify that the players listed below have registered and meet all eligible requirements to participate in the South Dakota Baseball A Program as outlined in the South Dakota A Baseball bylaws and that all information listed is correct, to the best of my knowledge.

_____

Signature of Coach or Manager and date

Only 18 Players per

	Name – Last, First, Mi. Parents Address City, State, Zip	Date of Birth Age	Phone No.	Uniform No.	Position	Height Weight	School Attending	Year Graduate
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