

## LSDBF TEAM ROSTER

TEAM NAME	
ORGANIZATION	
DIVISION	circle one: COMPETITIVE, MIDDLE, or NOVICE

TEAM CAPTAIN'S NAME	CELL PHONE NUMBER	EMAIL ADDRESS

	FIRST AND LAST NAME (PRINT CLEARLY)	CELL PHONE NUMBER	AGE / M or F	2 WAIVERS SIGNED
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
	Drummer:			
	*Steersperson:			
	Alternate:			
	Alternate:			
	Alternate:			
	Alternate:			