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## 2024 Select Team      Tournament Roster

**ASSOCIATION:**

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**Team Name**

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	Players Name (print)	Date of Birth (m/d/yr)	Sweater Number
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

This roster must be submitted to the tournament convenor prior to the tournament weekend.  
Players must bring proof of age.

**Head coach certifies all of the above information is accurate and ALL PAYERS  
LISTED ABOVE ARE REGISTERED AND INSURED WITH NAMED  
ASSOCIATION .**

**COACHES SIGNATURE:** \_\_\_\_\_