

INDOOR SOCCER TEAM ROSTER FORM



TEAM NAME: _____
 MANAGER'S NAME: _____
 MANAGER'S PHONE: _____
 MANAGER'S EMAIL: _____

Circle Session: FALL/Session 1 WINTER/Session 2 SPRING/Session 3 SAUNA

Circle Division: Youth Travel JH Travel Adult Co-ed Adult Men's

PLAYER'S NAME	ADDRESS	RES	NON RES
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

Youth Travel and JH Travel Teams only

Coaches Names: *(A Morton Park Dist. background check form is required for all coaches)*

1) _____ 2) _____
 3) _____ 4) _____

You may list up to 4 coaches, but only 2 may be on the sideline during games.

Must roster a minimum of 8 players, maximum of 14.

Please attach an individual player waiver for every player.