



Roster Form

W-MASC Regional Tournament
Near West Fields
University of Wisconsin - Madison
2001 Observatory Dr, Madison, WI
October 28-29, 2017

Submit roster form to Tournament Staff on site at the tournament table

College/University Name: _____

Team Rep: _____ Rep Email: _____

Address: _____ PH: _____

City: _____ State: _____ Zip: _____

Signature of **Club Sports Director** verifying roster and player eligibility for institution
PH _____ Email _____

Please list players in ascending jersey number order. Roster limit: 24 team members. If necessary, list light jersey # first, then dark

Jersey #	PLAYER NAME	STUDENT ID #	Former Collegiate Varsity Player YES / NO	Listed on Varsity/NIRSA roster prior to fall '05 YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO
			YES / NO	YES / NO

Coaches: _____