Roster Form

W-MASC Regional Tournament
Outdoor Recreation & Athletic Facilities
Grand Valley State University
Allendale, MI
October 29-30, 2016

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

College/University Name: _____

Team Rep: _____ Rep Email: _____

Address: _____ PH: _____

City: _____ State: _____ Zip: _____

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

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**
			YES / NO	**YES / NO**
			YES / NO	**YES / NO**

Coaches: _____ _____