

Team Roster Form – 2010 Adult 7v7 Outdoor Soccer League

League Type: Coed Open Men's Open Men's 30+ Men's 40+ Women's Open

Day of the week: _____ **Session:** _____

Team Name: _____

Coach/Captain Information	Co-Coach/Captain Information
Name:	Name:
Address:	Address:
City, State, Zip	City, State, Zip:
Phone (H)	Phone (H)
Phone (C)	Phone (C)
Phone (W)	Phone (W)
Email:	Email:

Player List		To Be Filled out by MSF Staff	
Name	Date of Birth (Month/Day/Year)	Waiver Submitted	ID Issued
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			

Rosters are frozen at kickoff of your third match.



Maryland SoccerPlex