

Team Roster Form – Fall 2010



Adult Flag Football

League Type: (circle) Men's Open Coed Open

Session: (circle one or both) Session 1 Session 2

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.			
17.			
18.			

Rosters are frozen at kickoff of your third match.