





COACH & SUPPORT STAFF INFORMATION:		DATE OF BIRTH:	GENDER:
<i>LAST NAME</i>	<i>FIRST NAME</i>	<i>MM/DD/YYYY</i>	<i>M OR F</i>

THIS FORM MUST BE FILLED OUT COMPLETELY. INCOMPLETE FORMS WILL NOT BE ACCEPTED.

ON NEXT PAGE, PLEASE LIST ANY ATHLETES YOU HAVE TRAINING IN THIS SPORT BUT NOT COMPETING TODAY. THIS WILL ALLOW US TO HAVE YOUR FULL ROSTER FOR THE SEASON. THANK YOU!



