



## Florida Keys 5v5 Shootout Team Roster

**Roster Date:** \_\_\_\_\_

<b>Club/Region:</b> _____	<b>Team Name:</b> _____
<b>Coach Name:</b> _____	
<b>Asst. Coach Name:</b> _____	
<b>Uniform Colors:</b> _____	
<b>Shirt:</b> _____	<b>Shorts:</b> _____ <b>Socks:</b> _____
<b>Age Division:</b> U-9 U-10 U-11 U-12 U-13 U-14 U-16 U-19 Adult-Open Adult-Over-30 _____ Boys _____ Girls _____ Coed (circle one)	

*(List in Order By Uniform Shirt Number if Available)*

Shirt #	Player ID # <small>(youth div only)</small>	Player's Name <small>Last, First (please print)</small>	Age	Date of Birth	Telephone (or e-mail) <small>Including Area Code</small>

***By my signature below, I certify that all players on this roster are valid registered players in my club/region and are approved to participate in this tournament (youth only):***

**Coach:** \_\_\_\_\_

*Print Name*

*Signature (Blue or Red Ink)*