9th Annual Eastview Lightning Classic - Roster Form

Team Name:		**Level of Play:**	
Head Coach		**Manager:**	
Asst Coaches:		**Uniform Colors:**	
Asst Coaches:		**Sponsor:**	

Number	First Name	Last Name	Position (F, D, G)

Instructions:

1) Fill in player names (lowest jersey number to highest)
2) $25 gate fee per rostered player payable at check in (there will be no admission charged at the door)
3) There will be two (2) exemptions to the gate fee per team (i.e. Head Coach & Manager)
4) Email spreadsheet to John Pellicci (johnpellicci@gmail.com)
   or mail to: 13683 Dunbar Way Apple Valley, MN 55124

Questions? Call John Pellicci @ 612-860-9666 or Ann McNamara (651) 261-5699