TEAM ROSTER

Sport: **Season:** **Year:** **Coach:**

Name	Uniform #	Pos'n	Address (include city)	Zip	Sch*	Gr	Birth date	Home Phone	Parent Name (s)	Parent E-Mail Address
Ex. Smith, John Jr.	123	RT	123 Smith Rd, Pittsford	14534	MHS	12	02/01/88	555-1212	John and Mary	John_Smith@pittsford.monroe.edu

*Indicate High School: M = Mendon, S = Sutherland. For middle school teams – indicate which high school athlete will attend