JUNIOR TEAM ROSTER FORM

North Country Region

Send this form WITH your individual registration forms to the region office when you register your team.

TEAM NAME		AGE DIVISION		TEAM RANK	

(The team name must include your club name, team age level and a ranking (i.e.: 1, 2, 3, Black, Red, etc. Example: North Country 12-1)
(The team rank is the team's ranking versus other teams within the same age group in *YOUR* club.)

TEAM REP NAME		PHONE (H)		WORK			
ADDRESS		CITY		STATE		ZIP	
EMAIL ADDRESS		**each team should have an e-mail address (please print clearly)**					
CLUB NAME							

1. **After completing this form, make several copies.**
2. **ATTACH A COMPLETED ROSTER TO EACH TEAM YOU REGISTER.**

(All teams within this club need to have the same club name when registering. The club name MUST be apart of your team name!)

ROSTER

NAME List all team members including coaches and team reps	Uniform # (Optional)	Position (Optional)	Height (Optional)	Grade	Fee Pd ✓	Completed Registration Form Attached (**REQUIRED**) ✓	Background Check Information (if needed) ✓	If this person is already registered with another team, write the name of the team here and indicate coach (c) or player (p)
Club Director:								
Team Rep:								
Head Coach:								
Asst. Coach:								

Mail completed form and registrations to: **North Country Region, Attn: Ken Miller, 14100 Hardy LK RD SW, Pillager, MN 56473-2224**

FOR OFFICE USE ONLY											
Date Rec'd		Registrations		Team		Individual		Fee Rec'd		Initials	