



TEAM ROSTER – JPRD EASTBANK – ADULT LEAGUES

Adult Softball _____ Night _____ Bracket _____

Please PRINT or TYPE all information.

	Player's Name (first and last)	Complete Address	Phone
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
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10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			

Team Name _____ *List all deletions (& date)*
 Name of team last season (if different) _____ 1.
 Name (Captain) _____ 2.
 Address (Captain) _____ Zip Code _____ 3.
 Phone (Captain) (cell) _____ (other) _____ 4.
 E-Mail (Captain) _____ 5.
 _____ 6.
 Name (Assistant) _____ 7.
 Address (Assistant) _____ 8.
 Phone (Assistant) (cell) _____ (other) _____ 9.
 E-Mail (Assistant) _____ 10.

I certify that the above information is true and correct.

Signature of Captain/Assistant _____

Date _____