I.C.C.L. OFFICIAL PLAYER ROSTER FORM					
NAME OF SCHOOL					
NAME OF TEAM					
NAME OF COACH			PHONE #		•
SPORT		BOYS		GIRLS	
NAME OF PLAYER	DATE OF BIRTH	<u>AGE</u>	SCHOOL GRADE	WEIGHT	JERSEY #
Players birthdays and age	s must agree with so principal, or			sted to by the	school
Signed					
Signed					
Date					