

OFFICIAL PENNSYLVANIA STATE CYO ROSTER BASKETBALL



Please check one: ___ Girls Grade School ___ Boys Grade School ___ High School

Name of Team/Organization _____ Nickname _____

(Parish/School) Address _____ City _____ Zip _____

Diocese _____ Team Colors _____

(Roster limited to 15 players)

	Player Name	Jersey # Home/Away	Age	Grade	Pos.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

NOTE: You will be expected to reimburse the host Diocese for the costs of the meal and memento for each player over the stated limit.
Please use an additional sheet, if necessary, to list additional names.

Head Coach _____ Home Phone (____) _____ Work Phone (____) _____

Address _____ City _____ Zip _____

Assistant Coach (1) _____ Home Phone (____) _____

Assistant Coach (2) _____ Home Phone (____) _____

Certified Trainer _____ (Adult) Team Scorekeeper _____

Signature – Diocesan Athletic Director _____ Date _____