

PCSA Tournament

Master Roster

TEAM NAME: _____

DIVISION: U _____

Club Name: _____

Coach: _____

OSA Team Number: _____

	Player's Name (Please Print)	OSA Number	Shirt #
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

Please list all Team Officials that will be on the bench:
