

# Framingham Memorial Day Tournament Roster

Town / Club:	Age Group:	Date:
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Team Name:	Division	Shirt / Shorts Color	Boys / Girls
League:			

Coach:	Telephone:		
Address:	City:	State:	
Ass't Coach:	Telephone:		
Address:	City:	State:	

	Shirt #	Last Name	First Name	D.O.B	City	State	Telephone
1							
2							
3							
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19							

**Coach Certification**

*I certify that I will comply with MYSY/USYSA and League's bylaws, playing rules & Coaches Code of Conduct, and know the penalties for non-compliance.*

Coaches Signature: \_\_\_\_\_