



NC Team Member Roster Sheet



Church:		City:	
Name of Coach(s):			
<input type="checkbox"/> Sparks-A-Rama	<input type="checkbox"/> Truth & Training <input type="checkbox"/> Girls/Boys <input type="checkbox"/> Co-ed	<input type="checkbox"/> Trek 24/7	<input type="checkbox"/> Journey 24/7

Please turn this form in on game day at the coaches' meeting.

NAME	SECTIONS Yes/No (See below)	AGE (See below)	GRADE	DATE OF BIRTH
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				

(Signed) _____ (Signed) _____
Team Coach *Pastor/Commander*

SECTIONS:	Write "Yes" or "No" as to whether the team member has completed the book requirement as stated in Official Rules on www.awananc.com in order to be able to compete.
AGE:	Team member's age on September 1 of this ministry year.