# Canby Youth Lacrosse Jamboree <br> Participating Team Roster 

Team: $\qquad$ Governing Agency/Board:

Level: $3 / 4 \quad 5 / 6 \quad 7 / 8 \quad$ (Circle One)

Coach: $\qquad$ Coach Address:

Coach Phone: $\qquad$ Coach Other Phone:

Players: Please list all players on your team. List anyone who may play even if you are not sure.

| Last Name | First Name | Birthdate | Address | City | State | Zip |
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This information is used only for insurance purposes to verify the age of players as well as the number of teams and total players.

