

SCHOOL Monroe 1
TEAM NAME _____
GRADE LEVEL High School

HEAD COACH Joe Axe
STREET 3327 W. Lincolnshire
CITY Tol ZIP Oh
PHONE 419-509-2806

ASST. _____
STREET _____
CITY _____ ZIP _____
PHONE _____

ASST. _____
STREET _____
CITY _____ ZIP _____
PHONE _____

TEAM ROSTER

<u>Name</u>	<u>Grade</u>	<u>Birth Date</u>	<u>Age</u>	<u>Phone #</u>
1 <u>Alyssa Axe</u>	<u>9</u>	_____	_____	<u>419-509-2806</u>
2 <u>Brea Krumy</u>	<u>9</u>	_____	_____	<u>419-206-4840</u>
3 <u>Meghan Kruszyński</u>	<u>9</u>	_____	_____	<u>419-474-3142</u>
4 <u>Morgan Kruszyński</u>	<u>9</u>	_____	_____	<u>419-474-3142</u>
5 <u>Delaney Sullivan</u>	<u>9</u>	_____	_____	<u>419-810-5222</u>
6 <u>Sam Bodette</u>	<u>9</u>	_____	_____	<u>419-471-9591</u>
7 <u>Phil Webster</u> ^{Cortez} _{Bad Elk}	<u>9</u>	_____	_____	<u>419-475-4236</u>
8 <u>Sarita Avalos</u>	<u>9</u>	_____	_____	<u>419-810-3778</u>
9 <u>Priscilla Rogers</u>	<u>9</u>	_____	_____	<u>419-349-1357</u>
10 <u>Imagla Jacobs</u>	<u>9</u>	_____	_____	<u>419-705-5226</u>
11 <u>Julie Navarro</u>	<u>9</u>	_____	_____	<u>419-292-0305</u>
12 _____	_____	_____	_____	_____
13 _____	_____	_____	_____	_____
14 _____	_____	_____	_____	_____
15 _____	_____	_____	_____	_____
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19 _____	_____	_____	_____	_____
20 _____	_____	_____	_____	_____

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1st & 2nd copies to league
3rd copy to school organizer
4th copy to head coach.