



Unionville Milliken Soccer Club
 2010 All Star/Select Tournament
 August 28 & 29, 2010
Team Roster

CLUB: _____ TEAM: _____ AGE GROUP: _____

COACH: _____ MANAGER: _____

Seq	Player's Name	Shirt #	Year of Birth	Guest Player	OSA Number	Checked by:
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
Roster Maximum for Mini Teams (U7,U8,U9,U10)						
15						
16						
17						
18						

On behalf of the players, team officials and team supporters, I agree to abide by the Tournament rules as set out by the Tournament Committee, including strict adherence to the CODE OF CONDUCT and ZERO TOLERANCE set therein and accept responsibility to ensure that the players, team officials and team supporters, are made aware of and abide by these rules. I acknowledge that the information as stated above is complete and accurate.

Team Official Signature: _____ Phone Number: _____

Team Official Title: _____ Alternate Phone: _____

Tournament Registrar: _____ Date: _____