

New England Youth Sports Association, Inc.

Fast Pitch Softball Roster

____10-U ____12-U ____14-U ____17-U

Official Roster Form (please type or print CLEARLY)

No.	Name (First)	Name (Last)	Town	DOB	Age
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
RP					
RP					

*Please add your reserve players regular team with her name.

Team Name:

Head Coach:

Asst Coach:

Asst Coach:

Asst Coach:

Total Number on Roster:_____ Approved by:_____ Date:_____