

Pete Kokinis Baseball League
 Official Fall 2020 Team Roster
Roster and Copy of Birth Certificates Due Before First Game
PLEASE PRINT

Town _____ Team Name _____ Division _____

	Player Name	Age as of 5/1/2020	Date of Birth	Cell Phone
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				

	Name	Cell Phone	E-mail Address
Manager:			
Coach:			
Coach:			
Coach:			

REMINDER: Any adults in contact with players must undergo a background check. For more information, visit the Background Checks page on our website, kokinisbaseball.com.