

43rd AAU Girls' Junior National Championship

Team: ESVBC Fury 16U

Team Code: fj6estcv1gl

Club: Eastside Volleyball Club

Division: 16 Classic

Jers. #/Pos.	Name	AAU #	AAU # Ver.	Birthdate	Entry Date
10/Middle	Bielfeldt, Lydia	43899WA6	Y	12/11/1999	6/1/2016
31/Middle	High, Mary	438EC3A6	Y	2/7/2000	6/1/2016
3/Left	Link, Jaden	44WYBFA6	N	10/18/2000	6/1/2016
1/Left	Majors, Hannah	434ATDA6	Y	3/26/2001	6/1/2016
2/Libero	Montgomery, Caley	3B5CWYA5	Y	10/27/2000	6/1/2016
6/Setter	Popken, Katlyn	3B5AE7A5	Y	12/31/2000	6/1/2016
9/Setter	Tamayo, Ciela	439TEWA6	Y	2/4/2000	6/1/2016
4/Middle	Taylor, Alivia	3B5A7CA5	Y	2/12/2001	6/1/2016
5/Left	Uppole, Rachael	4383WAA6	N	3/21/2003	6/1/2016
8/Setter	Weller, JOSSIE	435T63A6	Y	1/21/2000	6/1/2016
Head Coach	Smalley, James	437WW6N6	Y	7/7/1964	6/1/2016

Total team count: 11 (10 players and 1 staff members)

**Denotes player is team captain

Event Roster & Medical/Emergency Release Form Requirements

1. The above roster is correct and contains all players who will be participating in the event. All players listed on the roster must be registered or members in good standing with their respective Member Organization.
2. All players must meet age classification requirements. NOTE: Age Waiver players are NOT eligible for Qualification events and National competitions (National & Regional Qualifiers and the Junior Olympics).
3. All staff listed on the roster must be registered or members in good standing with their respective Member Organization. A staff member listed on the roster for the team/club will be with this team/club at all times during while attending this competition.
4. All coaches are required to be at a minimum Impact certified
5. A staff member listed on the roster for the team will be with this team and have in their immediate possession at all times during this competition a complete and legible copy of the Medical/Emergency Release Form for each player listed on the official roster.
6. The team understands it is subject to any and all penalties for incorrect or incomplete information on this form.

Print Name

Signature

Phone Number

Date