

SHOW-ME STATE GAMES – CLAY CLASSIC ROSTER FORM

Club/Team Name _____

Team Name _____

Coach Name _____

Coach Number _____

City _____

Email Address

Athlete Name (Last, First) DOB (M/D/Y) Event(s) Preferred Start Time(s)

DOB (M/D/Y)

Event(s)

Preferred Start Time(s)

*Each individual player must complete an entry form. Only one "coach" needs to complete an entry form to act as the contact person. This person will be the contact person which will receive all game information. Make sure the team name and coach's name listed on this page match the corresponding two fields on each of the individual player entry forms. Please submit all individual player entry forms along with roster and fee at the same time.