Southside Catholic Conference

TEAM NAME: 2019

VARSITY FOOTBALL ROSTER (Players should be listed in numerical order by jersey number)

JERSEY #	LAST NAME	FIRST NAME	ADDRESS	PHONE #	DATE OF BIRTH	GRADE	SCHOOL PLAYER ATTENDS	R.E.P. (Y/N)	PLAYED LAST SEASON (Y/N)

TEAM MANAGEMENT

FIRST NAME	LAST NAME	PHONE	EMAIL	ROLE					
				HEAD COACH					

BY SIGNING THIS ROSTER FORM YOU ACKNOWLEDGE THAT YOU HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE RULES SET FORTH BY THE SOUTHSIDE CATHOLIC CONFERENCE:

PASTOR OR PRINCIPAL

SPORT COORDINATOR