

PLEASE COMPLETE IN ALPHABETICAL ORDER AND PRINT CLEARLY OR TYPE

# Softball BC Minor Provincial Championship Roster Form

DISTRICT:

TEAM NAME:

CATEGORY:

COACH AND NCCP LEVEL:

COACH AND NCCP LEVEL:

MANAGER:

CONTACT NUMBER WHILE AT PROVINCIALS:

|     |           |
|-----|-----------|
| 1.  | CONFIRMED |
| 2.  | CONFIRMED |
| 3.  | CONFIRMED |
| 4.  | CONFIRMED |
| 5.  | CONFIRMED |
| 6.  | CONFIRMED |
| 7.  | CONFIRMED |
| 8.  | CONFIRMED |
| 9.  | CONFIRMED |
| 10. | CONFIRMED |
| 11. | CONFIRMED |
| 12. | CONFIRMED |
| 13. | CONFIRMED |
| 14. | CONFIRMED |
| 15. | CONFIRMED |
| 16. | CONFIRMED |
| 17. | CONFIRMED |

**Maximum number of players is 15 except for U19A, U19B and U20C the maximum is 17**

**Please mark all pickups on this form with an (\*)**