

HUDSON VALLEY SPORTSDOME

THE HUDSON VALLEY'S PREMIER SPORTS FACILITY

SOCCER TEAM ROSTER

TEAM NAME: _____

DIVISION: _____

COACH/CAPTAIN NAME: _____

Phone Number: _____ Alternate Phone _____

ROSTER IS FROZEN AFTER THE 3rd GAME of the SESSION

I agree not to add any player to the Roster without notifying management prior to player taking the field.

I agree not to allow anyone not on this Roster to take the field.

PLAYERS:

Coach/Captain Signature

Date

Name

Jersey #

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

15. (Additional Fee) _____

16. (Additional Fee) _____