



NOVA Cup All-Star Tournament Roster

Club Name: _____

Age Division: _____ Team Name: _____

Coach: _____ Phone: _____

Asst Coach: _____ Phone: _____

# of Players (Max #)	Player Name	Date of Birth	Jersey No.
1			
2			
3			
4			
5			
6			
7			
8 (U8 Max)			
9			
10			
11			
12			
13			
14 (U9-10 Max)			
15			
16 (U11-12 Max)			
17			
18 (U13-19 Max)			

Note: Rosters must be certified by the sponsoring club official. Coaches may not sign/certify team rosters.

Teams need two copies of the signed tournament roster to register. Tournament staff will mark both copies, keep one, and return the other. Teams must have the marked copy of the Tournament roster at all games.

I certify that all birth dates are correct and that each player meets all Tournament eligibility requirements, as stated in the tournament rules.

Club Official _____

Date: _____

Printed Name _____

Phone: _____