TEAM SHEET

TEAM_____DIVISION

SHIRT NO.	PLAYER NAME (PLEASE PRINT)	SIGNATURE

I, _____(Team Contact Name) CERTIFY THAT ALL OF MY PLAYERS ARE ACCREDITED FOR THIS TEAM IN THE 2022 PAN PACIFIC MASTERS GAMES AND ARE OF THE CORRECT AGE FOR THIS DIVISION

_____ _____

Signature Team Contact **Mobile Number**

NOTE: **TEAM SHEET MUST BE COMPLETED BY ALL PLAYERS PRIOR TO COMMENCEMENT OF GAME AND RETURNED TO ADMINISTRATION.**
PLAYERS ARRIVING LATE OR AFTER FIRST GAME MUST COMPLETE AT ADMINISTRATION BEFORE PLAYING.

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