



2021-2022 WNYAHL Mite Jamboree League

Preliminary Application Roster

Host Assoc: _____ Date(s): Red _____ Blue _____

Registration & Roster Form

Please Print Legibly

Association Name: _____ Team Name: _____

Team Contact: _____ Contact Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-Mail: _____ Team Colors: _____

Player Information:

| Player Name | Birth Date |
|-------------|------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| 11. | |
| 12. | |
| 13. | |
| | |

Head Coach Name: _____ CEP Card: _____ Cert. Level & Date: _____

Asst. Coach Name: _____ CEP Card: _____ Cert. Level & Date: _____

Are coaches responsible for multiple teams? If yes, please list here.

Please Circle Division your team is playing in: **RED DIVISION** or **BLUE DIVISION**

Please rate your group of players: VERY STRONG STRONG GOOD AVERAGE WEAK BEGINNERS

Contact for more information:

Tony Pierino (WNYAHL Jamboree Coordinator)

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