

2013 FBAO JUVENILE NATIONAL QUALIFIER TEAM ROSTER

Team Name: _____

Region: _____

Category: Male Female

Sweater Colour: Home Away

Team contact: Phone

	C/A/ g	#	#	Name (Please print clearly)	Signature (to be signed at registration)	Birthdate dd/mm/yy	Registered Team Name
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PU							
PU							
		Nccp#					
Coach							
Manager							
Trainer							

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Other					
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