

# Danvers SOCCER SALUTING SOLDIERS Festival

## 2021 Team Roster

TOWN/CITY  
TEAM NAME


AGE GROUP

Gr 2/U08  Gr 4/U10  BOYS  GIRLS

COACH INFO:

last name:		first name:	
email:			
address:			
city:	state:	zip:	
phone:	cell:		

Asst Coach (1)

last name:		first name:	
email:			
phone:	cell:		

Asst Coach (2)

last name:		first name:	
email:			
phone:	cell:		

Players:

	last name	first name	date of birth mm/dd/yyyy	Festival Use Only	
				med rel	affltn
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

**Instructions:**

1. **Download** form and **complete** all applicable fields.  
*Note: All rosters are preliminary until you register the day of your games*
2. **Save** the completed **preliminary** roster as "your team name roster" and **email** as an attachment **PRIOR TO 11/5/2021** to:  
**DSSSF2021@gmail.com**
3. You may **update** and **edit** your roster as often as necessary until you register prior to your first game
4. **Print** your **FINAL** roster and bring with you to Registration **WITH MEDICAL RELEASES AND PROOF OF AFFILIATION** prior to your first game