Texas Charter School
Academic & Athletic League
2011-2012 Roster Form

Campus: _____
Division: _____
Age Level: _____
Sport: _____
Mascot: _____
Team Colors: _____

Jersey #	Player	Grade	Birthday
Head Coach			
Asst Coach			
Certified Trainer			

By signing this form, you confirm that:
1. All Information provided is correct.
2. All players are academically eligible for the start of the season.

Signed _____ Date _____
Print _____
Head Coach or Athletic Director

Signed _____ Date _____
Print _____
Principal or Administrator