**2015 Virginia Youth Basketball OF America**

 **Team Roster Form**

 Address: 9569 Coggs Bills Drive #104, Manassas, VA 20110 Phone: 917-771-3984 Website: [www.vayboa.com](http://www.vayboa.com)

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| **YBOA Teams Fee includes your Team Registration liability & Secondary Accident coverage for up to 12 Players**  |
|  **3 Coaches have the option to purchase Liability & Secondary Accident Coverage on a sport for $15.00 Each**  |

**Team Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Boys or Girls \_\_\_\_\_\_\_\_Grade \_\_\_\_\_\_\_Division \_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NO. | Player NAME | Address | Birthdate | Grade | Grade Exception |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO  |
|  |  |  |  |  |  YES OR NO |
|  |  |  |  |  |  YES OR NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Coach Name |  |  |  |  |
| Assistant Coach |  |  |  |  |
|  Score Keeper |  |  |  |  |
|  Email  |  |  |  |  |
|  Contact  | Cell | Home | Assistant # |  |

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| **Good Luck To All Teams. All Players And Coaches must have on uniforms and coaches must have on a polo shirt . “All Teams must have birth certificates or walker ID from DMV” FOR ALL PLAYERS** |
|  Thank You for playing Va. YBOA  |

 There are No changes or add on players to your rosters after the Third Qualifier on April 11 2015.