KNOX METRO YOUTH FOOTBALL
WEIGH-IN SHEET ROSTER
2017

Team Name: _____
Head Coach: _____
Address: _____
_____
City State Zip
Email: _____
Phone: (W) _____ (H) _____
(Cell): _____

CLASSIFICATION

Please circle one:

☐ Flag ☐ Jr. Hopper's ☐ Hopper's
☐ Cutter's ☐ Minor Pee Wee's ☐ Pee Wee's
☐ Jr. Varsity ☐ Varsity

NOTICE: (A player must wear the same jersey number all season)

(IN NUMERICAL ORDER)			WEEK NUMBER									
Jersey Number	**NAME**	**Exact Weight**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**