

OFFICIAL TEAM ROSTER Date: Team Name:

TEAM MANAGER'S AFFIDAVIT- I am responsible of the above mentioned team & after receiving the Norwalk Recreation and Parks rules I say that all the information supplied above is correct to the best of my knowledge & that all the players signed the above in

PRINT OR TYPE PLAYER'S NAME	DATE OF	PHONE NUMBER	NORWALK	EMAIL ADDRESS	PLAYER OR PARENT SIGNATURE
	BIRTH		RESIDENT		
			YES/NO		

their handwriting & they are eligible to compete with my team.	
Manager's Name (Print):	Supervisor/Umpire/Referee Statement:
Manager's signature:	ALL OF THE INFORMATION ON THIS ROSTER IS CORRECT TO THE BEST OF MY KNOWLEDGE:
Manager's full address:	Name (Print):
Phone:	Signature:
Email:	Date: