



# WINSTARS COLLEGE SHOWCASE

## Roster form- 2019

Academy Name: \_\_\_\_\_

Please list up to (20) twenty players including their full name, jersey number, Date of Birth

	Jersey #	Player Name	Date of Birth	GPA/SAT Test Score
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
	Role	Team Official Name		

Team Contact Phone Number: \_\_\_\_\_

By signing this form, the team's head coach certifies that all information included is accurate and complete.

Coach: \_\_\_\_\_ Signature: \_\_\_\_\_