



Official Team Roster

The following form must be completed and returned to the UFL Officials prior to your team's initial game of the registered season. This roster may not be used for multiple seasons/tournaments. Note: Payment must be received before the day of the first game (unless other arrangements have been made).

Please complete this form thoroughly. Missing information is cause for it to be returned. League/Tournament team rosters will not be accepted from teams missing information or the appropriate registration fee(s).

Coach's Name: _____ Team Name _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone (H) _____ (W) _____ (F) _____

Season (Spring or Fall) _____

Style (8Man or 5Man) _____ Division (i.e. A, B or C): _____

(Please attach a copy of the team's waiver forms with this roster)

Coach/Asst Name	Email Address	Date of Birth	Signature	
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2.				
Player Name(Print)	Email Address	Date of Birth	Jersey #	Signature
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