

**TEAM MEMBER DETAILS SHEET**

TEAM: \_\_\_\_\_ YEAR: \_\_\_\_\_

BOYS / GIRLS

U19 / U18 / U15 / U12 [*Please Circle*]

No.	Christian Name	Surname	DOB	School	Email	Phone
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<b>SHADOWS</b>						

Coach: \_\_\_\_\_ School: \_\_\_\_\_ Manager: \_\_\_\_\_ School: \_\_\_\_\_