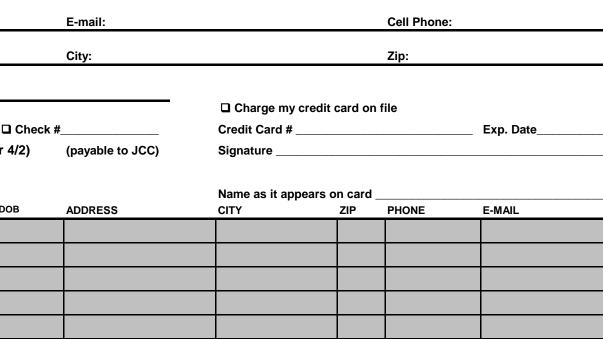
## JCC - 2019 Spring Tipoff Classic - April 23rd and 25th

Submit roster & payment to Alex at alangella@jccstl.org



Schoo	ol majority of players attend:								
Fee E	nclosed \$		Check #	<b>#</b>	Credit Card #		redit card on file Exp. Date ears on card ZIP PHONE E-MAIL a a a a a a a a a a a a a a a a		
Tues	s/Thurs - Per team: \$250 and \$3	00 (afte	er 4/2)	(payable to JCC)	Signature				
(PLEAS	SE PRINT LEGIBLY)				Name as it ap	pears on card			——— J Member
	PLAYER NAME	Grade	DOB	ADDRESS	CITY	ZIP	PHONE	E-MAIL	(yes or no)
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

COACH'S SIGNATURE

DATE		

the

\*Please Note\* A player will be considered illegal & not abel to play if NOT listed on official roster.

Coach:

Address: