

For Office Use Only
Team ID:
# of Players:
# of Goalies:

## **CDMHA Team Roster Request Form**

D.O.B. of	
Sponsor, Colour:  Coaching Staff is Required!	
Head Coach: D.O.B	
Trainer: D.O.B	
Please check one:	
Asst. Coach Trainer D.O.B.	
Asst. Coach Trainer D.O.B.	
Asst. Coach Trainer ManagerD.O.B	
After the coach and trainer positions are filled, additional team officials may be designated up to a maximum of five (5). If a team wishes to add additional personnel, they will be designated as either assistant coach or assistant trainer or manager. The team may only add one Manager to their roster having only Respect in Sport (RiS)-Activity Leader or Speak as a qualification.	Out
Goalie: Jersey #	
Goalie: Jersey #	
List in alphabetical order by surname:	
1. Player: Jersey #	
2. Player: Jersey #	
3. Player: Jersey #	
4. Player: Jersey #	
5. Player: Jersey #	
6. Player: Jersey #	
7. Player: Jersey #	
8. Player: Jersey #	
9. Player: Jersey #	
10. Player: Jersey #	
11. Player: Jersey #	
12. Player: Jersey #	
13. Player: Jersey #	
14. Player: Jersey #	
15. Player: Jersey #	
16. Player: Jersey #	
17. Player: Jersey #	
By signing this Roster Request, I have verified that the required players and coaches have provided me with Proof of Vaccination. False reporting will result in removal from the team roster by the OMHA.	
Date: Name: Signature:	