



# League Team Roster

To reserve a spot in the Hoop Dreamz League please send completed roster form along with \$200 deposit to PO Box 381 Westwood, NJ 07675. Balance is due before or on the day of first game. NO EXCEPTIONS!!!

Team Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender:  M  F Level:  A  B  
 Coach: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_  
 Asst. Coach: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

	Player's Name	Grade	Email
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

**Scheduling requests may be listed below.**  
**Once the schedule is posted, NO CHANGES CAN BE MADE!**  
**Any missed games will result in a forfeit.**

---



---



---