



DIOCESE OF ERIE
Diocesan Athletic Programs
Sports Roster / Eligibility Form

FOR OFFICE USE ONLY:

Amount Paid: _____
 Date: _____
 Paid by: _____
 Cash or Check #: _____

Participation fees and Release Forms **MUST** accompany this Roster List by the above due date. Roster Additions must be submitted to the Diocesan Athletic Office with the Participation Fee and Release Form **BEFORE** the player will be allowed to participate.

The Pastor or Principal's signature MUST be on this form to validate the information provided. INCOMPLETE FORMS WILL NOT BE ACCEPTED.

School: _____ Sport: _____ Date: _____

Coach's Name: _____ Address: _____ City: _____ Zip: _____

Phone: _____ Address: _____ City: _____ Zip: _____

Assistant Coach: _____ Address: _____ City: _____ Zip: _____

Phone: _____

Team Nickname: _____ School Colors: _____ Uniform Colors: _____

Priest Moderator: _____ Managers: _____

Only REGISTERED Coaches and Assistant Coaches listed on appropriate rosters are allowed to sit on the bench at a game and coach the players.

	Jers. #	Name:	School	Grade	Address:	Zip:	Phone:	Birth Date:	Position	Release Form
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										

Pastor or Principal Signature: _____ Date: _____