# UTAH SOCCER ASSOCIATION

OFFICIAL TEAM ROSTER

Date: _____ Time _____ Game #: _____

Field: _____

Team: _____

| Shirt No. | Uniform ✔ | Player I.D. (all 9 digits) | Pass | 7 Needed To Start First Name Last | Start | Sub |
|---|---|---|---|---|---|---|
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Coach: _____

Signed: _____

THIS FORM MUST BE HANDED TO THE REFEREE
BY THE CLUB OFFICIAL BEFORE THE GAME