



# Texas Amateur Athletic Federation Official Team Roster Form – YOUTH (MINOR)

7  
**Region**

Mesquite  
**City**

7 on 7  
**Sport**

**Division**

**Team Name**

NOTE: 1.) Each player and team manager should read the statement on Page 2 before completing and signing this roster.

**\*\*Enter S.M.A.R.T. training Certification date (s) & which family unit members ( guardian, father or mother) completed training**

<b>**S.M.A.R.T. Cert. Date &amp; G, F, M</b>	<b>Print or Type Player's Name</b>	<b>Bonafide Residence (Street, City, State, Zip)</b>	<b>Texas Drivers Lic or Picture ID #</b>	<b>Date of Birth</b>	<b>Parent/Guardian Signature</b>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					

**TEAM MANAGER'S GUARANTEE:** Each manager should read the statement on Page 2 before completing and signing this roster.

\_\_\_\_\_  
Manager's Name (Print or type)

\_\_\_\_\_  
Signature of Team Manager

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager's Address (Print or type)

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Signature of local T.A.A.F. Representative

\_\_\_\_\_  
Signature of Region Director or Region Tournament Director (if applicable)

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Business Phone