North Dakota Amateur Basketball Incorporated

Return filled roster via email to

	Team Roster • 2021 - 2022 Division:			bwilkens@bisparks.org.			
City or Town		Team_					
Геат Manage <u>r</u>			S				_
	State			Zip			
Manager's Home Phone Work Phone			Phone				_
E-Mail Address							_
I, and all my executors, administrators her	reby waive and release any and all right	ts and claims against the North Dakota association play and league plaj		ch as injuries, wh	nich may re	sult while	participating in
							REDSHIRT OR COLLEGE
PLAYER'S NAME	SIGNATURE	ADDRESS	E MAIL ADDRESS	HITC	D.O.B.	AGE	EXPERIENCE
1							
2							
3							
4							
5							
6 7							
8							
9							
10							
11							
12							
13							
"Pick-up Players" (for State Tou	ırnament only). Must be approv	red by local league representati	ve.		!		
The under	rsigned officials certify that the a	bove named players are eligible	e under the Incorporated Rule	s and Regula	tions.		

Signature of Team Manager or Player