

ROSTER AMENDMENT FORM

YOUR PARISH TEAM _____

YOUR HEAD COACH _____

YOUR TEAM'S LEVEL _____ PICK FROM ONE BELOW

VARSDITY, JUNIOR VARSITY, SENIOR RESERVE, RESERVE, JUNIOR RESERVE.

GENDER OF YOUR TEAM _____ BOYS OR GIRLS.

NAME OF YOUR LEAGUE DIVISION _____

IS THIS A TEMPORARY OR PERMANENT ROSTER MOVE? _____

NAME OF PLAYER OR PLAYERS BEING MOVED AND TEAMS THEY CURRENTLY PLAY FOR

NAME _____ TEAM _____ HEAD COACH _____

NAME _____ TEAM _____ HEAD COACH _____

NAME _____ TEAM _____ HEAD COACH _____

DATE PLAYER(S) WERE USED _____

PLEASE SEND THIS FORM TO JULIUS PALAZZO jmpalazzo@juno.com

JOE SESTITO varsitysg@yahoo.com

MARTY RAINES mraines@cducation.org

Either prior to the game or within 24 hours after the game.

If you are mailing:

Send to: JULIUS PALAZZO
3140 W. MOUND ST.
COLS, OH 43204

or

MARTY RAINES
197 E. GAY ST.
COLUMBUS, OH 43215

FAILURE TO FOLLOW PROCEDURE MAY RESULT IN PENALTIES INCLUDING SUSPENSIONS,
FORFEITS OR OTHER SANCTIONS.