## Parkview Parochial League Basketball Team Roster

Year	Parish / School	Grade	Boys or Girls	Division /A or B or Color		
2024 - 2025						
Head Coach	Head Coach Address	City	Zip	email	Phone Number	
Assistant Coach	Assist. Coach Address	City	Zip	email	Phone Number	

								For 6-8th grade did	If NO Explain on back of
	Player Name	U#	Street Address	City / Zip Code	Birth Date	Grade	School Attending	they play for you last yr?	sheet in detail.
1								Yes	NO
2								Yes	NO
3								Yes	NO
4								Yes	NO
5								Yes	NO
6								Yes	NO
7								Yes	NO
8								Yes	NO
9								Yes	NO
10								Yes	NO
11								Yes	NO
12								Yes	NO
13								Yes	NO
14								Yes	NO
15								Yes	NO

"We certify that each team member listed above has written parental permission to play in the Parkview Parochial League, that each member is within the age limit and is eligible to play under League rules and that any CYF students are actively involved in the Parish CYF Program."

To the best of our knowledge, all players listed conform to all eligibility rules, all coaches have satisfied the certification requirements, and the team and the athletic program at the parish/school are in compliance with all current Archdiocese of Milwaukee Policies & Procedures for Athletics

Principal or Pastor

Date

DRE / CYF Program Director

Date

EMAIL SIGNED ROSTERS TO: keith.stachowiak@gmail.com