



Dioceses of Pittsburgh Boys Volleyball League

Official Team Roster Form for Year _____



School Name: _____ Color/Team: _____ JV or Varsity: _____

Coach Name: _____ Asst. Coach Name: _____

	Player Name	Grade
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____

Principal Signature: _____ Date: _____

Please mail to:
Tim King
 1244 Oakwood Drive
 Jefferson Hills, PA 15025

Or email:
vb4tking@gmail.com

Phone:
 412.965.9793 (c)
 412.653.5571 (h)