



Dioceses of Pittsburgh Girls Volleyball League

Official Team Roster Form – Year: _____



School Name: _____ Team Color: _____ 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)