

# St Charles County Golden Games

**TEAM ROSTER**

**\$160 per team**

Each player must submit an individual participant form so the waiver and other personal information is captured, as well as the individual registration fee IF participating in any other events. Kick-off banquet information is on individual registration form  
 - please indicate on the individual registration form if attending the banquet and/or if paying for a guest. Thank you

**Team Name:** \_\_\_\_\_

**Team type:** Men / Women / Co-Ed **Age bracket?** \_\_\_\_\_

**Team Captain:** \_\_\_\_\_

	Participant (first & last name)	Date of Birth	M / F	Telephone	Email	T-shirt Size
Captain 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

**Volleyball coordinator: Pat Dittmeier [dittopd@hotmail.com](mailto:dittopd@hotmail.com)**

Thank you for supporting the 30th Annual St Charles County Golden Games!