

East Hills Recreation Commission
101 Community Way, Suite 101
Johnstown, PA 15904
814-269-0303(phone)
jeff@easthillsrec.com

Team Roster

Team Name _____ Sport _____ League _____

<u>Players Name</u>	<u>Complete Address</u>	<u>Phone Number</u>	<u>Municipality*</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____
5 _____	_____	_____	_____
6 _____	_____	_____	_____
7 _____	_____	_____	_____
8 _____	_____	_____	_____
9 _____	_____	_____	_____
10 _____	_____	_____	_____
11 _____	_____	_____	_____
12 _____	_____	_____	_____
13 _____	_____	_____	_____
14 _____	_____	_____	_____

*Please List your borough or township of resident-Non-residents will be assessed a \$10 out of district fee

I certify that this roster is correct and complete, and subject to check by the East Hills Recreation Commission.

Date _____ Manager's Signature _____