



# MISSISSAUGA HOCKEY LEAGUE

## 2018 – 2019 MINOR NOVICE ROSTER FORM

DATE OF GAME: \_\_\_\_\_ SCHEDULED START TIME: \_\_\_\_\_ OPPONENT: \_\_\_\_\_

YOUR TEAM: \_\_\_\_\_

HOME: Y / N

VISITOR: Y / N

YOUR PLAYERS:	
NO.	PRINT NAMES ("AP" FOR AFFILIATED PLAYERS)

YOUR COACHES:	
	PRINT NAMES
HC	
AC	
AC	
MGR	
T	

I CERTIFY THAT THE PLAYERS AND TEAM OFFICIALS LISTED HAVE VALID REGISTRATION CERTIFICATES FOR THE CURRENT SEASON.

\_\_\_\_\_  
SIGNATURE OF TEAM OFFICIAL