

Inc. Village of Rockville Centre Recreation

Flag Football Program 2020 Roster

Team Name: _____ Select One: **4th 5th 6th 7th** Grade as of Sept.2020

Team Rep Name	Address	Town	Zip Code	Parent Cell Phone	Parent Home Phone
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Alternate Rep Name	Address	Town	Zip Code	Parent Cell Phone	Parent Home Phone
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Team Rep Parent Email Address

Alternate Rep Parent Email Address

Player's name	Address	Town	Grade <small>as of Sept. 2020</small>	School	Phone	Staff Notes
1						
2						
3						
4						
5						
6						
7						
8 Minimum						
9						
10						
11						
12 Maximum						

ALL PLAYERS MUST LIVE IN RVC OR ATTEND SCHOOL IN RVC TO PARTICIPATE

Email completed roster to Troy at thassler@rvcny.us