

# LRDA Roster Form

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

**Team Sponsor:** \_\_\_\_\_

**Team Captain:**

**Email/Cell Phone:**

\_\_\_\_\_

\_\_\_\_\_

**Team Co-Captain:**

**Email/Cell Phone:**

\_\_\_\_\_

\_\_\_\_\_

**Team Members:**

**Email/Cell Phone:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Sponsor Signature:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_