TEAM CAMP ROSTER

JUNE 7-9, 2018

Player's Name	Class Level	Shirt Size
	Freshman, JV, Varsity	Adult S, M, L, X, 2X

Yes, we're in _____ Sorry, not this year_____

TEAM_____

COACH_____

E-MAIL_____

HOME PHONE_____CELL PHONE_____

Please fax this form to Tim Walsh at (208) 282-4784 or return via email to walstim@isu.edu. Coach Walsh can be reached at (208) 406-6907.