

CT PRE ROSTER FORM



All teams are required to complete a pre-season roster form prior to their first regularly scheduled game. This state generated form includes DOB, school and parent's home address of all team members. The form must be returned to the respective zone chairman before the first scheduled game. A copy of this form must also be presented to the opposing team before each game prior to June 25, 2008. After this date teams will have finalized their team roster on National Form #1. Failure to complete a pre-season roster and failure to present it to opposing teams before submission of the final roster will result in a \$50 fine that will be paid to the State Baseball Committee. This rule has been adopted to prevent any potential forfeit situations that sometimes occur before the submission of final rosters.

TEAM: DATE: / /

	Active	Player Name	Parent Address (City, ST, Zip)	DOB	School
1	<input type="checkbox"/>			/ /	
2	<input type="checkbox"/>			/ /	
3	<input type="checkbox"/>			/ /	
4	<input type="checkbox"/>			/ /	
5	<input type="checkbox"/>			/ /	
6	<input type="checkbox"/>			/ /	
7	<input type="checkbox"/>			/ /	
8	<input type="checkbox"/>			/ /	
9	<input type="checkbox"/>			/ /	
10	<input type="checkbox"/>			/ /	
11	<input type="checkbox"/>			/ /	
12	<input type="checkbox"/>			/ /	
13	<input type="checkbox"/>			/ /	
14	<input type="checkbox"/>			/ /	
15	<input type="checkbox"/>			/ /	
16	<input type="checkbox"/>			/ /	
17	<input type="checkbox"/>			/ /	
18	<input type="checkbox"/>			/ /	
19	<input type="checkbox"/>			/ /	
20	<input type="checkbox"/>			/ /	