

MAHA DISTRICT / STATE CHAMPIONSHIPS: TEAM CREDENTIALS

(complete the top portion of this page)
PLEASE PRINT

CLASSIFICATION: _____ CATEGORY: _____ DIVISION: _____

ASSOCIATION: _____

TEAM NAME: _____ COLORS: HOME _____ AWAY: _____

TEAM CONTACT:	NAME: _____
Coach: _____	ADDRESS: _____
Manager: _____	CITY/ZIP: _____
	CELL PHONE: _____
	EMAIL: _____

ALTERNATE CONTACT: Coach: _____ Manager: _____	NAME: _____ ADDRESS: _____ CITY/ZIP: _____ CELL PHONE: _____ EMAIL: _____
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CREDENTIALS CHECK (For MAHA use only)

CERTIFIED TEAM (1-T) ROSTER: GAME LOG: Total Games As of:

VERIFIED BY (print name and initial): _____ DATE VERIFIED: _____

Notes:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.