



Official NASA Basketball Team Roster Form 2019

Date: January 11 - 12, 2019 <> Cherokee, NC



Team Name: _____ TRIBE: _____

Head Coach: _____ Phone #: _____

WOMEN LEGENDS Team

WOMEN Regular Division

MEN LEGENDS Team

MEN Regular Division

Tourney Check In		TEAM ROSTER (Please Print Information)	Date of Birth	Tribe	Enrollment # or CDIB	NASA Region Board Member Initials
	1					
	2					
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

Your assistance is requested in meeting organizational requirements for certification of participation in NASA - sponsored events
I certify that, according to our records and to the best of my knowledge, the above information is accurate.

NASA Board Representative: _____ Phone #: _____

Recreation Department Director: _____ Phone #: _____

Tournament Entry #