

Southern Hospitality 2018

2/17/2018 - 2/18/2018

Team LVBR 15 Regional
Club Louisiana Volleyball

Team Code FJ5LAVBC2BY
Division 15 Girls

Jers. # / Pos.	Name	USAV #	USAV Ver.	Birthdate	Coach Cert.	BGS Ver	SafeSport	Impact	Added
10	Adejare, Tamera	BY2695557FOJ18	Y	08/03/03	Player	-	-	-	12/04/17
12	Bell, Trinity	BY3042771FOJ18	Y	10/16/02	Player	-	-	-	12/04/17
22	Garner, Treasure	BY2712861FOJ18	Y	07/23/03	Player	-	-	-	12/04/17
21	Latore, Jada	BY3080790FOJ18	Y	11/29/02	Player	-	-	-	12/04/17
3	Madere, Emma	BY2818407FOJ18	Y	07/23/03	Player	-	-	-	12/04/17
17	Meeks, Madeline	BY2749899FOJ18	Y	04/17/03	Player	-	-	-	12/04/17
1	Norman, Angel	BY2693245FOJ18	Y	10/10/02	Player	-	-	-	12/04/17
27	Odums, Jasmine	BY2830492FOJ18	Y	05/15/03	Player	-	-	-	12/04/17
Head Coach	Bowman, Bridget	BY2386674FOA18	Y	07/05/71	IMPACT	USAV	USAV	USAV	12/04/17
Assistant Coach	Calais, Vatterra	BY2181048FOA18	Y	10/30/96	IMPACT	USAV	USAV	USAV	12/04/17
Assistant Coach	Jacobs, Venessa	BY1399032FOA18	Y	12/16/71	IMPACT	USAV	USAV	USAV	12/04/17

Roster size: 11 (8 players and 3 staff members)

** Denotes player is team captain, [W] Denotes waived player

Event Roster & Medical/Emergency Release Form Requirements

1. The above roster is correct and contains all players who will be participating in the event. All players listed on the roster must be registered or members in good standing with their respective Member Organization.
2. All players must meet age classification requirements. NOTE: Age Waiver players are NOT eligible for Qualification events and National competitions (National & Regional Qualifiers and the Junior Nationals).
3. All staff listed on the roster must be registered or members in good standing with their respective Member Organization: have completed SafeSport certification and cleared the approved background screening. A staff member listed on the roster for the team/club will be with this team/club at all times during while attending this competition.
4. All coaches are required to be at a minimum Impact certified.
5. A staff member listed on the roster for the team will be with this team and have in their immediate possession at all times during this competition a complete and legible copy of the Medical/Emergency Release Form for each player listed on the official roster.
6. The team understands it is subject to any and all penalties for incorrect or incomplete information on this form.

Print Name

Signature

Phone Number

Date