



S.C. AAU BASEBALL OFFICIAL ROSTER

TEAM NAME AGE GROUP CITY/STATE CLUB NUMBER

BY SIGNING THIS APPLICATION: I agree to be bound by the AAU CODE as well as the AAU operating procedures and policies, including but not limited to: binding arbitration & the release & Indemnity of the AAU. By paying my annual membership dues, I certify that I have never been convicted of any sex offense nor felony or If so, I must apply for membership (and receive approval) through the AAU National Office. I further certify that this membership is correct in every material aspect, including but not limited to my (street) address and birth date.

	Player Name	AAU Number	Birthdate	Home Phone	Street Address, City, State, Zip
1					
2					
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20					

COACHING STAFF / NON-PLAYING ROSTER MEMBERS

CO-COACH BB-BATBOY SK-SCOREKEEPER

	Name	AAU Number	Work Phone	Home Phone	Street Address, City, State, Zip
CO					
CO					
CO					
SK					
BB					

TEAM MANAGER'S AFFIDAVIT

I am the manager of the above team and guarantee all of the information supplied above is correct to the best of my knowledge and that all members are eligible to compete with my team in AAU events and agree to be bound by the rules and regulations of the AAU.

Signature of Team Manager

Manager Name (Print)