2024 April Fools Fallout

4/6/2024 - 4/7/2024

Team	EC Power DTOWN 12-Neon	**Team Code**	G12ECPWR15KE
Club	East Coast Power Volleyball	**Division**	11/12 Girls

Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	Giumento, Joe	07/31/71		12/26/23
Assistant Coach	Hughes, Caitlin	12/10/00		12/26/23
Team Representative	McGuiney, Roberta	10/20/87		12/26/23
1	Cook, Amelia	01/12/12	2030	12/26/23
10	Ward, Kinsley	06/26/13	2031	12/26/23
11	Hadfield, Olivia	10/27/11	2030	02/16/24
13	Stineman , Genevieve	05/02/12	2030	12/26/23
14	Swain, Sairah	07/02/11	2029	12/26/23
15 Setter	Giumento, Ryann	11/24/11	2029	12/26/23
20	Bibeau, Lorelei	08/28/12	2030	12/26/23
24	Harper, Aaliyah	06/07/12	2030	02/16/24
28	Calvey, Sasha	08/31/11	2029	12/26/23

Roster size: 12 (9 players and 3 staff members)   ** Denotes player is team captain, [W] Denotes waivered 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 Olympics).
3. All staff listed on the roster must be registered or members in good standing with their respective Member Organization. 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

[submitted 02/16/2024 12:51:17 PM]