

2023 ECP Cup

1/7/2023 - 1/8/2023

Team EC Power BERKS 14-Coastal
Club East Coast Power Volleyball

Team Code G14ECPWR5KE
Division 14 Girls

Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	Aron, Brett	12/26/63		12/31/22
Assistant Coach	Aron, Taylor	05/13/98		12/31/22
Team Representative	McGuiney, Roberta	10/20/87		12/31/22
4 Left	Benner, Keira	04/05/09	2027	12/31/22
7 Libero	Holloway, Reese	01/15/09	2027	12/31/22
9 Left	Yang, Sarah	06/04/10	2028	12/31/22
11 Left	White, Carly	12/08/08	2027	12/31/22
13 Setter	Fabian, Jayleannie	11/10/08	2026	12/31/22
16 Left	Troutman, Claire	06/16/09	2027	12/31/22
20 Setter	Turner, Eden	01/07/09	2027	12/31/22
21 Left	Scaglione, Arianna	05/20/09	2027	12/31/22
27 Middle	Bialek, Piper	09/27/08	2027	12/31/22
34 Left	Legath, Ava	04/09/09	2027	12/31/22
35 Libero	Jankowski, Lilly	03/26/09	2027	12/31/22

Roster size: 14 (11 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 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 12/31/2022 01:56:29 PM]