

2023 Irish Rumble

3/11/2023 - 3/12/2023

Team EC Power CH 15-Marvel DE
Club East Coast Power Chesapeake

Team Code G15ECPCH1CH
Division 15 Club

Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	Bufano, Michael	06/24/67		02/05/23
Assistant Coach	Mann, Samantha	05/20/02		02/05/23
Team Representative	Smith, Christopher	07/02/91		02/05/23
2 Setter	Yang, Joy	05/26/08	2026	02/05/23
3 Left	Carson, Genevieve	10/04/07	2026	02/05/23
4 Left	Koya, Aashritha	06/25/08	2025	02/05/23
5 Left	Serth, Claire	11/04/07	2026	02/05/23
6 Libero	Mendoza, Princess	09/20/07	2025	02/05/23
10 Left	Xu, Lorya	04/04/08	2026	02/05/23
12 Middle	Heller, Payton	03/14/08	2026	02/05/23
13 Setter	Schrader , Kylie	03/11/08	2026	02/05/23
17 Left	Ross, McKenzie	02/01/08	2026	02/05/23
18 Left	Miller, MaKenzie	04/03/08	2026	02/05/23
26 Middle	Biddle, Nora	03/13/08	2026	02/05/23

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