2024 JVA Charm City Challenge

2/3/2024 - 2/4/2024

Team EC Power BUCKS 13-Eclipse Club

Team Code East Coast Power Volleyball Division

Jers. # / Pos.	Name	Birthdate	JVA BG	Added
Head Coach	Hill, Kyle	03/16/83	Yes	12/26/23
Assistant Coach	Rabe, Julia	06/21/02	Yes	01/31/24
Assistant Coach	McGuiney, Roberta	10/20/87	Yes	01/17/24
1 Middle	O'Brien, Alexys	10/19/10		12/26/23
3 Right	Hornby , Avery	08/29/10		12/26/23
4 Left	Chung, Eunice	11/24/10		12/26/23
7 Setter	Emmerich, Kayla	07/28/10		12/26/23
9 Left	Liu, Sophia	09/22/10		12/26/23
10 DS	Horcher, Addyson	12/28/10		12/26/23
14 Left	Brexler, Charley	03/14/11		12/26/23
16 Right	Hill, Emma	09/11/10		12/26/23
22 Left	Pettigrew, Taliya	10/22/10		12/26/23
25 Left	Reinhart, Keileigh	06/23/11		12/26/23
28 Left	Lillo, Lucianna	12/04/10		12/26/23
44 Middle	Austin , Claire	09/09/10		12/26/23

G13ECPWR8JVAJV

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

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Event Roster & Medical/Emergency Release Form Requirements

Roster size: 15 (12 players and 3 staff members)

- 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	

[submitted 01/31/2024 02:26:00 PM]