

2024 JVA Charm City Challenge

2/3/2024 - 2/4/2024

Team EC Power KOP 18-Diamond
Club East Coast Power Volleyball

Team Code G18ECPWR2JVAJV
Division 18 Club

Jers. # / Pos.	Name	Birthdate	JVA BG	Added
Head Coach	Syracuse, Randy	08/02/58	Yes	01/17/24
Assistant Coach	Odoorisio, Carlye	04/28/98	Yes	01/17/24
Assistant Coach	Heins, Edwin	03/16/71	Yes	01/23/24
2 Left	Acevedo , Valerie	01/02/06		01/17/24
3 Setter	Ferello, Erin	02/23/06		01/17/24
4 Left	Ginther, Kayla	04/29/06		01/17/24
7 Left	Heins, Sofia	06/07/06		01/17/24
9 DS	Dogan, Zeynep	03/01/06		01/17/24
10 Libero	Della Franzia, Alexandra	04/17/06		01/17/24
14 Middle	Hornickle, Lillianna	09/23/05		01/17/24
16 Setter	Hu, Rachel	07/31/06		01/17/24
18 Right	Dysart, Ainsley	12/09/05		01/17/24
24 Libero	Uejima, Zita	01/19/06		01/17/24
28 Middle	Jefferys, Jillian	11/01/05		01/17/24
37 Middle	Hornung, Keira	08/01/06		01/17/24

Roster size: 15 (12 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 01/23/2024 03:06:55 PM]