2024 JVA World Challenge

4/12/2024 - 4/14/2024

TeamEC Power KOP 17-SteelTeam CodeG17ECPWR1JVAJVClubEast Coast Power VolleyballDivision17 Premier

Jers. # / Pos.	Name	Birthdate	JVA BG	Added
Head Coach	Kolesnik, Kimberly	10/23/85	Yes	01/22/24
Assistant Coach	Arnow, Alexander	08/10/99	Yes	04/08/24
Assistant Coach	McGuiney, Roberta	10/20/87	Yes	01/22/24
3 Right	Cholden, Kelly	01/15/07		01/22/24
5 Setter	Albrecht, Raven	06/05/07		01/22/24
6 Setter	McGonigal, Caitlyn	05/05/07		01/22/24
9 Left	Jovanovic , Jana	07/28/07		01/22/24
10 Middle	Hoover, Delaney	07/25/07		01/22/24
15 DS	Levan, Casey	08/09/10		01/22/24
18 DS	Patel, Anya	04/18/07		01/22/24
23 Left	Coulter, Lola	04/10/07		01/22/24
24 Middle	Welsh, Caroline	09/25/06		01/22/24
29 Left	Barnhart, Ava	11/20/06		01/22/24

Roster size: 13 (10 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	
Tille Name	Jigi latul e	
Phone Number	 Date	
	[submitted 04/08/2024 10:25:17 AM]	

[submitted 04/08/2024 10:35:1 / AM]