

2024 MLK Kickoff Challenge

1/13/2024 - 1/15/2024

Team EC Power BERKS 18-Satin
Club East Coast Power Volleyball

Team Code G18ECPWR6KE
Division 18 National

Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	Wesley, Sara	09/11/96		12/26/23
Assistant Coach	Cook, Corrinne	09/10/00		01/09/24
Team Representative	McGuiney, Roberta	10/20/87		12/26/23
1 Libero	Klinger, Kamryn	05/09/06	2024	12/26/23
7 Middle	Moyer, Ridleigh	07/17/07	2025	12/26/23
9 Right	Ely, Isabella	09/05/07	2025	12/26/23
10 Libero	Elk , Sarah	06/10/07	2025	12/26/23
15 Left	Mack, Riley	11/04/05	2024	12/27/23
17 Left	Ortiz, Justice	03/07/06	2024	12/26/23
21 Middle	Feathers, Macy	03/20/06	2024	12/26/23
22 Middle	Shewmake, Macy	02/19/06	2024	01/02/24
23 Middle	Palmieri , Mia	06/29/06	2024	12/26/23
28 Left	Mack, Taylor	04/08/09	2027	12/26/23
36 Setter	Christman, Jenna	04/25/07	2025	12/26/23

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