2024 Northeast Qualifier 4 (16OULA, 17ULA)

4/26/2024 - 4/28/2024

Team Club	EC Power DTOWN 16-Victory East Coast Power Volleyball		Team Code Division		G16ECPWR16KE 16 American				
Jers. # / Pos.		Name	USAV #	US	AV Ver.		Birthdate	Grad Year	Added
3 Left		Theiller, Ava	3348134	Y			08/23/08	2026	12/26/23
8 Libero		Morraye, Claire	4383136	Y			01/12/08	2026	12/26/23
9 DS		Lizardo, Jamie	3303039	Y			09/26/07	2026	12/26/23
10 Left		Lewis, Brooke	4380178	Y			10/09/07	2026	12/26/23
13 DS		McFeely, Keira	4493784	Y			10/09/07	2026	12/26/23
14 Left		rakow, caroline	4692819	Y			10/04/07	2026	12/26/23
15 Left		Kupiec, Addison	4651632	Y			04/16/08	2026	01/03/24
16 DS		Peno, Olivia	4418582	Y			02/06/08	2026	01/02/24
18 Left		Barr, Molly	4127180	Y			02/18/08	2026	12/26/23
20 Setter		Pisano, Sophia	4415099	Y			10/05/07	2026	12/26/23
27 Left		rakow, katie	4692834	Y			10/04/07	2026	12/26/23
Head Coach		Mullin, Robert	3053016	Y			11/01/71		12/26/23
Assistant Coac	h	England, Michelle	4713113	Y			02/04/86		12/26/23
Team Represe	ntative	McGuiney, Roberta	1226574	Y			10/20/87		12/26/23
Roster size: 14	** Do	notos nla	avor	is team cantair	[W] Denotes w	aivered plaver			

Roster size: 14 (11 players and 3 staff members)

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

Event Roster 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: Regional age waiver players are NOT eligible for qualification events and national competitions (National & Regional Qualifiers and Junior National Championships).
- 3. Rostered adults must meet all USA Volleyball eligibility requirements and must be in good standing with their respective Member Organization.
- 4. A rostered staff member is required to be with this team at all times during the competition.
- 5. The team understands it is subject to any and all penalties for incorrect or incomplete information on this form.

Print Name

Signature

Date

Phone Number

[submitted 01/03/2024 03:01:24 PM]