

# 2024 Prez Day Showdown

2/17/2024 - 2/18/2024

**Team** EC Power BUCKS 15-Indigo  
**Club** East Coast Power Volleyball

**Team Code** G15ECPWR8KE  
**Division** 15 National

Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	King, Joel	01/20/68		12/26/23
Assistant Coach	Lynch, Kinsey	07/26/82		12/26/23
Team Representative	McGuiney, Roberta	10/20/87		12/26/23
2 Left	Siuta, Zoe	09/02/08	2027	12/26/23
3 Left	Vonder Schmalz, Brynne	12/29/08	2026	01/05/24
4 Middle	Minacci, Allison	04/08/09	2027	12/26/23
5 DS	Christall, Isla	03/12/09	2027	12/26/23
8 Setter	Shank, Emma	04/24/09	2027	12/26/23
9 DS	Schimpf, Alivia	06/30/09	2027	12/26/23
10 Left	Lynch , Kya	09/09/09	2027	12/26/23
11 Left	Harm, Grace	09/07/08	2027	12/26/23
18 Left	Rivera, Lily	11/11/10	2029	12/26/23
22 Left	Darling, Summer	06/22/09	2027	12/26/23
23 Middle	Heininger, Sofia	05/25/09	2027	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