

# 2024 Prez Day Showdown

2/17/2024 - 2/18/2024

Team Club	EC Power LV 13-Horizon East Coast Power Volleyball	Team Code Division	G13ECPWR12KE 13 American	
Jers. # / Pos.	Name	Birthdate	Grad Year	Added
Head Coach	Achey, Lauren	08/12/00		12/26/23
Assistant Coach	Hudson, Ava	04/20/00		12/26/23
Team Representative	McGuiney, Roberta	10/20/87		12/26/23
2	Diaz, Nathalie	08/26/10	2028	12/26/23
3	Harper, Sophia	03/16/11	2029	12/26/23
6	Henichek, Reece	04/12/11	2029	12/26/23
9	Beller, Paige	12/06/10	2029	12/26/23
10	Espinosa , Sofia	11/18/10	2027	12/26/23
11	Roseman, Macie	05/11/11	2029	12/26/23
14	Kawczenski, Michaela	11/14/10	2029	12/26/23
15 DS	Weimer, Emily	03/12/11	2030	12/26/23
21	Kennedy, Liviana	12/21/10	2029	12/26/23
23	Ali, Amani	02/23/11	2029	12/26/23

Roster size: 13 (10 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