

United States Slo-Pitch Softball Association
OFFICIAL SIOUX FALLS CHURCH TEAM ROSTER
ROSTER ADDENDUM

Church Attenders

Player's Full Name	Pastor's Signature
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____

Church Name: _____
Phone Number: _____
Church Address: _____

Date: _____

Pastor's Verification: This is to certify those listed above are regular attenders of my church and that each player conforms to the eligibility rule governing church teams.

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