

Maryland Interscholastic Athletic Association

ROSTER FORM

School: _____ Athletic Director: _____

Sport: _____ Head Coach: _____

Level: ___ Varsity ___ JV ___ F/S Date: _____ ___ Initial ___ Final

Final rosters are due at the end of season meeting.

No player may migrate down to an undersquad team after the initial roster is submitted.

	First Name	Last Name	Grade	DOB	Transfer?
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Please submit all rosters to: sandi@miaasports.net or fax 410-544-2283