

Billiard Congress of America

Roster Sheet

League: **OUTLAWS LEAGUE #425**

State Texas

Date _____

TEAM NAME: _____

SUNDAY MIXED 8-BALL LEAGUE

PLEASE PRINT ALL INFORMATION

Captains Name: _____

Mailing Address: _____

City: _____ State/Prov _____

Zip: _____ Telephone: _____

Date of Birth: _____

Email Address: _____

Player's Name: _____

Mailing Address: _____

City: _____ State/Prov _____

Zip: _____ Telephone: _____

Date of Birth: _____

Email Address: _____

Player's Name: _____

Mailing Address: _____

City: _____ State/Prov _____

Zip: _____ Telephone: _____

Date of Birth: _____

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