When Completed SAVE AS Club/Team Name and Grade

Please Fill In ALL Areas

2020 Tennessee AAU Girls Basketball Roster

Team/Club Name/ Coach's last name			**AAU Club #**
Grade :			**Home #**
FAX Number :		**Cell Number :**	**E-Mail :**

State Tournament: (Please indicate Grade): **Site:**

State Ranking Series event: (Please indicate Host Club): **Date:**

Coaches / Bench Personnel

	Last Name	First Name	AAU #	Home Phone	Cell Phone	Street Address	City	ST	Zip
Head									
Asst									
Asst									
Book									

	Last Name ALPHABETICAL ORDER	First Name	Birth Date	AAU Number	School	Grade	Street Address	City	ST	Zip
1										
2										
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