OMHA MODIFIED ICE

Participant List

Modified-Game #: Team Name:	ried-Game #: Date: Name:		Time: Location: Team Name:				
Jersey # Playe		Player Name (Please Print)	Jerse	Jersey #		Player Name (Please Print)	
		•		<u>, </u>		.,,,	
Bench Staff N		Name (Please Print)	Bend	Bench Staff		Name (Please Print)	
Coach			Coac	Coach			
Trainer			Train	Trainer			
Manager			Mana	Manager			
Asst. Coach/Trainer				Asst. Coach/Trainer			
Asst. Coach/Trainer			Asst.	Asst. Coach/Trainer			
		must be completed prior to the sta nch staff on the team's approved ro					
Referee Name (Please Print)				Н	COP#		
Referee Name (Please Print)				Н	COP#		
Referee Notes:							
Forward Complete	ed Copies 1	to:					
Scan completed for	orm and e	nail to cathy.baker-bell@omha.r	net				