



STUDIO PARTICIPANT ROSTER 2021



ALL ATHLETES TOTAL # _____

STUDIO NAME: _____ CELL: _____ EMAIL: _____ DATE: _____
 ADDRESS: _____ CITY: _____ STATE: _____ ZIPCODE: _____

★ AAU Clubs may submit a Club Roster

MEMBERSHIP STATUS

	FIRST NAME	LAST NAME	AGE	dd/mm/yyyy		CURRENT	NonMember	Consent
				BIRTHDATE	ZIPCODE	AAU #	×	×
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STUDIO ROSTER CONTINUED



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MEMBERSHIP STATUS

dd/mm/yyyy

CURRENT

NonMember

Consent

FIRST NAME

LAST NAME

AGE

BIRTHDATE

ZIPCODE

AAU #

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× Signed

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