2018 VETERANS OF FOREIGN WARS BASEBALL PLAYER ROSTER

NAME of TEAM		VFW DISTRICT #			
SPONSORING POST NUMBER	C I	T Y			
INSURANCE CARRIER		POLICY #			
Name		School Name	Birth Date	Uniform #	
1.					
2.					
3.					
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20.					
COACHES WILL SEND ROS	TER DIRECTLY	TO THE STATE BASEE	BALL CHAIRI	MAN	
COACH NAME	ADDRESS				
COACH PHONE NUMBERS (H)	(C)	EMAIL			
ASST. COACH		PHONE (H)	(C)		
		PHONE (H)			
Post Officer must complete bottom,					
POST OFFICER (printed)					
PHONE NUMBERS (H)			()		
ALL INFORMATION ON ROSTERS M			S WILL BE ACC	EPTED.	
DISTRICT YOUTH CHAIRMAN'S VERI An Automated Fill-In Roster F					
Vor2018	omi is Avallable a	www.iiii.gov/viw/i bas	<u>coamnotory.Htt</u>	<u>11</u>	

BEFORE entering any Team info, You MUST:

- Open Document
- Click 'File' and Select 'Save As'
- Rename the document
- Save the document on your computer
- Once it is saved, you may begin entering your Team information
- To Start Double Click in a highlighted box

AFTER entering your team info, You MUST:

- Save your document again
- Print completed form
- Get required signatures
- Keep one copy
- Send 1 copy to the STATE VFW Baseball Chairman:
 - Rick Bugbee, State Baseball Chairman 2825 Lakeview Drive Fergus Falls, MN 56537 Phone: 218-770-5656

rickbug@prtel.com