

# ORSS BASEBALL ROSTER FORM

For all AAU and ORSS/City of Rocky Mount tournaments, please complete and

Fax to: 252-443-0787

or

Mail to: ORSS

4913 Redwood Lane  
Whitakers, NC 27891

Make check

payable to: ORSS

For all Top Gun events, including CABA, USTBA, and Super Series, please register

at the Top Gun web site: <http://www.playtopgunsports.com>

Date \_\_\_\_\_

TEAM NAME      AGE GROUP      CITY/STATE

## TEAM PLAYERS AND COACHES

#	Print or Type Player's Name	AAU Code Number	Street Address, City State	Zip	Birth Date	Home Phone
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XX	XXXXXX	XXXXXXXXXX	XXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XX	XXXXXX	XXXXXXXXXX	XXXXXXXXXXXX
	Print or Type Coaches Name	AAU Code Number				
1						
2						
3						
	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XX	XXXXXX	XXXXXXXXXX	XXXXXXXXXXXX

Teams must have birth certificates with them for all roster players during events.