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| --- | --- | --- | --- | --- | --- |
| **TOURNAMENT ROSTER 2025**  **Oregon Super Cup** | | | | | |
| Club Name: | Team Name: | **Player Cards Issued By:** | | Birth Year: | Gender: |
| OYSA / USYS | US Club Soccer |

7v7 teams max roster 16 players | 9v9 teams max roster 18 players

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| --- | --- | --- | --- | --- | --- |
| **MUST BE TYPED – NO HANDWRITTEN NAMES** | | | | | |
|  | Player / Coach / Manager Name | Coach | Manager | Date of Birth | Jersey Number |
| Coach / Manager |  |  |  |  |  |
| Coach / Manager |  |  |  |  |  |
| Coach / Manager |  |  |  |  |  |
| Coach / Manager |  |  |  |  |  |
| Player 1 |  |  |  |  |  |
| Player 2 |  |  |  |  |  |
| Player 3 |  |  |  |  |  |
| Player 4 |  |  |  |  |  |
| Player 5 |  |  |  |  |  |
| Player 6 |  |  |  |  |  |
| Player 7 |  |  |  |  |  |
| Player 8 |  |  |  |  |  |
| Player 9 |  |  |  |  |  |
| Player 10 |  |  |  |  |  |
| Player 11 |  |  |  |  |  |
| Player 12 |  |  |  |  |  |
| Player 13 |  |  |  |  |  |
| Player 14 |  |  |  |  |  |
| Player 15 |  |  |  |  |  |
| Player 16 |  |  |  |  |  |
| Player 17 |  |  |  |  |  |
| Player 18 |  |  |  |  |  |

Do NOT send to the Tournament Director

Bring SEVEN copies to team check-in. Players may NOT play with or be on more than one roster

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| Signature of Registrar / Club Official: Date: |
| Print Name: |
| Title: |
| Signature of Club Registrar is REQUIRED FOR ALL TEAMS |