



NCTTA Ordered Team Roster

School Name: _____ Men's/Coed Women's

Team Type: A/Varsity B/Junior Varsity No. _____

Name of Event/Location: _____ **Date:** _____

Position	Name	Email
1		
2		
3		
4		
5		
6		
7		
8		

Team Captain's Signature _____



Date & Time Received:
(Tournament use only)

League Sponsor