MCYO Monsignor Coates Youth Organization

School/Parish: _____ Activity: _____ Year: 20____ Girls ____ Boys ____

Coach(s): _____ League: Varsity/Class AA _____ Cub _____ Northstar _____

Address: _____ City _____ Zip _____ Phone _____

School Address: _____ City _____ Zip _____ Phone _____

Players Name	Grade	Address	City	Zip	Phone	Parents

Approved By: (Pastor or Principal): _____ Coach: _____

* NOT an official roster unless signed by the appropriate Administrator Send to: MCYO 1919 Logan Avenue North Minneapolis. MN. 55411