



Summit AwanaGames™

# Team Member Roster Sheet

\*\*\* PLEASE TURN THIS IN AT TEAM CHECK-IN \*\*\*

Church Name/Team Name \_\_\_\_\_

City, State \_\_\_\_\_

Coach Name \_\_\_\_\_

Coach cell phone # \_\_\_\_\_

G  
I  
R  
L  
S

B  
O  
Y  
S

	NAME	HAS STUDENT COMPLETED THE CURRENT FAITH'S FOUNDATION?*	DATE OF BIRTH**
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

\*FAITH'S FOUNDATIONS – Team member must have completed the current Faith's Foundation.

\*\*DATE OF BIRTH –Team Members must be ninth to 12th graders

Team Coach Signature \_\_\_\_\_

Pastor/Commander Signature \_\_\_\_\_