2016-2017 BERA Volleyball Roster

League:		**Captain:**	
Team Name:		**Co-Captain:**	

Player Name	**Phone**	**Email**	**Building**	**Life # (or relationship to emp)**	**Gender (M/F)**	**BNL Emp? (Y/N)**

I certify that all players listed on this roster sheet meet the qualifications for participation in BERA sports.

Captain's signature: _____