



# TOURNAMENT OFFICIAL ROSTER

*Non Sanctioned USA Hockey Event*

CCM Chi-Town Shuffle

CCM Blue Chip Invite

CCM Summer Invite

Team Name:

Birth Year:

Elite AAA:

AAA/AA:

CEP# (optional)

Head Coach:

Head Coach Phone #:

Assistant Coach:

Assistant Coach:

Manager:

Manager Phone:

Player Last Name

Player First Name

DOB (mm/dd/yyyy)

- 1
- 2
- 3
- 4
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- 15
- 16
- 17
- 18
- 19
- 20

**Please complete and return no later than  
30 days before start of tournament.**

SAVE AS **BIRTH YEAR & TEAM NAME** (Example: 2006 CCM Selects.pdf)

Email these documents to: [linda@200x85.com](mailto:linda@200x85.com)