

Athlete Identificat	ion & Weight Card Date Completed:	
Team Affiliation:		Level/Div:
Athlete Name:		Birth Date:
Athlete Address:		Conference Age:
City:	Zip:	As of Aug.1st of Current Year  Uniform No.:
School:	Grade:	Weight:
Medical Conditions:		weight.
Other Information:		
Organization 1	o signatures from other MVFL Organizations Signature Signature	
· · · · · · · · · · · · · · · · · · ·	card is accurate and that said player meets all ay in MVFL and on this team.	
Head Coach Signature	Date	Official Weight At Jamboree
Team Manager	Date	
<u> </u>	weights must be approved below opposite off the appropriate box as to which attempt the	Weight
player has made weight. The weigh-ma	aster or authorized weight person must initial and the make weight or is not at game, strike through	Signature

'	Weigh-in attempts								
Week	1 <sup>st</sup>	2 <sup>nd</sup>	3rd	Date	Initials				
1									
2									
3									
4									
5									
C									

	Weigh-in attempts						
Week	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	Date	Initials		
7							
8							
9							
10							
11							
12							