TO: **CYO Athletic and Camping Office**
FAX TO: **(216) 334-1270**
PAGES: _____

FROM: _____

FAX (___) _____ PHONE (___) _____

PLEASE FAX THIS FORM TO THE CLEVELAND CYO BY 10:00AM ON MARCH 10, 2008! THANKS.

2008 OHIO STATE CYO HIGH SCHOOL BASKETBALL TOURNAMENT
Program Line-up Information Sheet

PLEASE PRINT - USE FIRST AND LAST NAME – NO INITIALS OR NICKNAMES

BOY _____ GIRL _____ Diocese: _____

Parish: _____ City: _____

Team Nick Name: _____

Head Coach: _____ Pastor: _____

Phone: _____ Phone: _____

Season Record: _____

Asst. Coaches: _____

PLEASE LIST PLAYERS IN NUMERICAL ORDER OF UNIFORM NUMBER

FIRST NAME	LAST NAME	GRADE	NUMBER

Please return this information sheet by MONDAY, MARCH 10, 2008, no later than 12:00 Noon. Please FAX to the CYO Office at (216) 334-1270.