THE STARS OVER TEXAS SHOWCASE - FALL TEAM ROSTER

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AGE	TEAM NAME	MANAGER	ADDRESS	CITY	STATE	ZIP	EMAIL ADDRESS	PHONE #	CELL #

#	Player Name / Parent Name	Home # / Cell #	Grad. YR / DOBirth	Address / Email Address	City If Committed	State / Name College	Zip / Hits/ Throws	High School / NCAA Clearing RegistrATION	POS 1 2 3	GPA	SAT	ACT