# I.N.F.C.
## OFFICAL ROSTER

ORGANIZATION INFORMATION

ASSOCIATION NAME: **BIXBY YOUTH FOOTBALL ASS.**

ASSOCIATION PRES: **JIM THOMPSON**

OTHER ASS CONTACT:_____

HEAD COACH:_____

ASST COACH:_____

ASST COACH:_____

ASST COACH:_____

PHONE NUMBERS

PHONE NUMBER **918 366-3500**

HOME PH_____CELL_____

HOME PH_____ CELL_____

HOME:_____CELL_____

HOME:_____CELL_____

HOME:_____CELL_____

HOME:_____CELL_____

**GRADE:_____ TEAM COLOR: _____ MASCOT: SPARTAN**

| JERSEY# | PLAYER NAME | DOB | STRIPE | GRADE |
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## PLAYERS NOT PLAYING

| JERSEY# | NAME | INJURED | DISCIPLINED | ABSENT | OTHER |
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**GO SPARTANS !!!**