



This form **ONLY** needs to be completed if your school is
NOT a member of the TSSAA MS Division

School Name _____ City: _____	2026 Roster Form (Please Print)	Coach's Name _____ Date: _____
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Last Name	First Name		Grade	Gender

I agree that no student will enter any interscholastic contest whose name is not registered as eligible. I hereby verify that the students whose names are registered attend and are eligible to represent our school in athletic contests under the rules for the Tennessee Middle School Golf Association.

Signed
:

Coach

Form is due before the student is eligible to participate in practice or competition.

Please email completed form to TMSGATngolf.org or fax to 615.790.8600.

Call the TGF Junior Golf Office at 615.790.3336 with any questions.



Linking *Youth* to Golf