



## Credential Book Audit Form



League Name

Age Group

	<u>YES</u>	<u>NO</u>	<u>Corrections Needed</u>		<u>Notes</u>
<b><u>LOE Issued</u></b>					

<b><u>Certificate of Insurance</u></b>					
Participant Accident					
General Liability					

<b><u>Roster</u></b>					
12-15 Players					
1-3 Coaches					
No PO Boxes on Roster					
Roster Digitally Signed by LP					

<b><u>Birth Documents</u></b>					
ID Card					
Other					
Missing			List names-->		

<b><u>Treatment Consent Forms</u></b>					
4 Part form					
Missing			List names-->		
Coaches Certificate					
Team Photo 2 copies					
Names Listed on photo					

Checked By