

APPENDIX A

SSSA Roster Addition/Deletion Form

Addition _____ Deletion _____ **(check one)**

Association: _____

League: _____

Team Name: _____

Coach: _____

Player's Name: _____

Work Phone: _____

Work Email: _____

Sandia Employee _____ Sandia Dependent _____ **(check one)**

Effective Date: _____

SERP Office Use Only

Date Received in SERP: _____

Online Registration Completed: Yes _____ No _____

Date Employee/Dependent Verified: _____

Date Added to Roster: _____