DECK REGISTRATION SHEET

First Letter of
Last Name



Date:		Event:	
Location:		Deck Name:	
LICINIC	THIS LIST SARD NAMES	Dock Designer:	

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Dec	ck: (Magic: 60 Minimum)		Main Dec	k Continu	ed & Basic	Lands:	
	# in deck:	Card Name:		# in deck:	Card Name	<u>!</u>		
	2	Blind Obedience						
	4	Basilica Guards						
	4	Syndic of Tithes						
	4	Basilica Screecher						
	2	Corpse Blockade						
	2	Crypt Ghast						
	4	Thrull Parasite						
	4	Blood Artist						
	4	Gravecrawler						
	2	High Priest of Penance						
	2	Obzedat, Ghost Council						
#	2	Angel of Serenity		Cidoboor	d. (Mania	+ - 15\		
DCI #:	4	Beckon Apparition			d: (Magic: Card Name	•		
				# III deck.	<u>cara rvanie</u>	<u>. </u>		
ë.		-						
First Name:					-			
First								
				Total Numb	er of Cards ir	Sideboard:		0
.:				FOR OFFICIAL USE ONLY		Main/SB:		
Last Name:				Deck Check Rd #:		Deck Check Rd #:		
ast.			40	Status:		Status:		