DECK REGISTRATION SHEET

First Letter of	
Last Name	



Date:		Event:	
Location:		Deck Name:	
LICINIC	N.C. ENICLICIA CARRAMEC		

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Ded	ck: (Magic: 60 Minimum)		Main Dec	ck Continued & Basic Lands:
	# in deck:	Card Name:		# in deck:	Card Name:
	3	Deathrite Shaman			
	4	Rakdos Cackler			
	4	Burning-Tree Emissary			
	2	Immortal Servitude			
	4	Vexing Devil			
	4	Grisly Salvage			
	4	Ash Zealot			
	2	Foundry Street Denizen			
	3	Droadboro	_		
	3	Searing Spear			
	4	Faithless Lasting			
#	4	Blood Crypt		<u></u>	1 (44)
DCI #:	4	Overgrown Temb			d: (Magic: up to 15) <u>Card Name:</u>
	4	Stomping Ground		# III deck.	<u>Card Name.</u>
	3	Swamp			
	3	Forest			
	5	Mountain			
		Modificant			
.:					
First Name:					_
First					
		_			
				Total Numbe	er of Cards in Sideboard:
e:				FOR OFFICIAL USE ONLY	Main/SB: /
Last Name:				Deck Check Rd #:	Deck Check Rd #:
Last	Total Numb		60	Status:	Status: