## **DECK REGISTRATION SHEET**

First Letter of
Last Name



Date:		Event:	
Location:		Deck Name:	
LICINIC I	INCLICIT CADD MANAEC	Deck Designer	

## PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Ded	ck: (Magic: 60 Minimum)		Main Deck	Continued & Basic Lands:	
	# in deck:	Card Name:		# in deck:	Card Name:	
	2	Drainpipe Vermin				
	3	Typhoid Rats				
	4	Pack Rat				
	4	Ravenous Rats				
	4	Gutter Skulk				
	4	Dreadbore				
	2	Rakdos's Return				
	4	Searing Spear				
	2	Liliana of the Dark Realms				
	1	Liliana of the Veil				
	4	Mind Rot				
	3	Duress				
DCI #:	1	Appetite for Brains		# in deck:	: (Magic: up to 15)	
	4	Blood Crypt		# III deck.	<u>Card Name.</u>	
	4	Dragonskull Summit				
	4	Mountain				
	6	Swamp		<del></del>		
	4	Mutavault		<del></del>		
.e:		Matavadit		<del></del> -		
First Name:				<del></del> -		
Firs						
				Total Number	r of Cards in Sideboard:	0
ie:				FOR OFFICIAL USE ONLY	Main/SB: /	
Last Name:				Deck Check Rd #:	Deck Check Rd #:	
Last	Total Numb		50 l	Status:	Status:	