DECK REGISTRATION SHEET

First Letter of
Last Name



Date:		Event:	
Location:		Deck Name:	
Location:		Dock Docianor	

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Dec	ck: (Magic: 60 Minimum)		Main Dec	k Continued & Basic Land	s:
	# in deck:	Card Name:		# in deck:	Card Name:	
	4	Godless Shrine				
	4	Mutavault				
	15	Plains				
	1	Swamp				
	4	Soldier of the Pantheon				
	4	Dryad Militant				
	4	Precinct Captain				
	2	Cavalry Pegasus				
	4	Imposing Sovereign				
	2	Frontline Medic				
	4	Xathrid Necromancer				
*	2	Fabled Hero		Cidoboore	d. (Mania, to 15)	
DCI #:	4	Gods Willing		# in deck:	d: (Magic: up to 15) Card Name:	
	4	Profit+Loss		<u># Ш асск.</u> 4	Keening Apparition	
	2	Spear of Heliod				
Je:						
First Name:						
Firs						
					-	
				Total Numbe	er of Cards in Sideboard:	4
e:				FOR OFFICIAL USE ONLY	Main/SB: /	
Last Name:				Deck Check Rd #:	Deck Check Rd #:	
Last	Total Numb	66 1	60 l	Status:	Status:	