DECK REGISTRATION SHEET



	Date:		Event:	
	Location:		Deck Name:	
PRINT CLEARLY USING ENGLISH CARD NAMES			Deck Designer:	

	Main Dec	k: (Magic: 60 Minimum)		Main Deck Continued & Basic Lands:				
	<u># in deck:</u>	Card Name:		<u># in deck:</u> Card	Name:			
	3	Surgical Extraction						
	4	Hedron Crab						
	1	Spell Pierce						
	4	Force Spike						
	4	Arcane Denial						
	4	Tome Scour						
	4	Thought Scour						
	4	Dream Twist						
	3	Archive Trap						
	4	Whelming Wave						
	4	Visions of Beyond						
DCI #:	21	Island		Sideboard: (M	agic: up to 15)			
ă				<u># in deck:</u> Card				
ame:								
First Name:								
Ē								
						0		
				Total Number of Ca	ards in Sideboard:	0		
ne:				FOR OFFICIAL USE ONLY	Main/SB: /			
Last Name:				Deck Check Rd #:	Deck Check Rd #:			
Last	Total Numb	er of Cards in Main Deck:	60	Status: Judge:	Status: Judge:			