DECK REGISTRATION SHEET

First Letter of Last Name

Date:		Event:	
Location:		Deck Name:	
		Deck Designer:	

PRINT CLEARLY USING ENGLISH CARD NAMES

DCI #:

First Name:

Last Name:

Main Deck: (Magic: 60 Minimum)

# in deck:	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
21	Island

Total Number of Cards in Main Deck: 60

Main Deck Continued & Basic Lands:

# in deck:	Card Name:

Sideboard: (Magic: up to 15)

# in deck:	Card Name:

Total Number of Cards in Sideboard: 0

FOR OFFICIAL USE ONLY	Main/SB: /
Deck Check Rd #:	Deck Check Rd #:
Status:	Status:
Judge:	Judge: