DECK REGISTRATION SHEET

First Letter of
Last Name



Date:	Event:	
Location:	Deck Name:	
	 Dock Docianor	

PRINT CLEARLY USING ENGLISH CARD NAMES

Mair	n Ded	ck: (Magic: 60 Minimum)		Main De	ck Continue	ed & Basic	Lands:	
<u># in d</u>	leck:	Card Name:		# in deck:	Card Name:	_		
	4	Eidolon of Blossoms						
	4	Courser of Kruphix						
	4	Nyx-Fleece Ram						
<u> </u>	2	Aegis of the Gods						
	4	Sphere of Safety						
	4	Banishing Light						
	2	Dow of Nulsa						
	1	Elixir of Immortality						
	2	Ajani, Mentor of Heroes						
	4	Kruphix's Insight						
	3	Selesnya Charm						
	2	Last Breath			1			
	4	Tomple Garden			'd: (Magic: ເ <u>Card Name:</u>			
	4	Temple of Plenty		# In deck:	<u>Card Name:</u>	_		
	8	Forest						
	4	Plains						
	 4	Mutavault						
		Mutavauit						
ame:								
First Name:								
				Total Numb	er of Cards in	Sidehoard		0
				FOR OFFICIAL USE ONLY		Main/SB:		
Vame —				Deck Check Rd #:		Deck Check Rd #:	/	
ast N			60	Status:	:	Status:		
Last Name:	Numb	(6.1:4:5.1	60		:			