## DECK REGISTRATION SHEET

First Letter of	of
Last Nam	ıe



Date:		Event:	
Location:		Deck Name:	
		Dock Docianor	

## PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Dec	ck: (Magic: 60 Minimum)		Main Dec	k Continued & Basic Lands:
	# in deck:	Card Name:		# in deck:	Card Name:
	4	Xathrid Necromancer			
	2	Doomed Necromancer			
	4	Cartel Aristocrat			
	4	Doomed Traveler			
	4	Gather the Townsfolk			
	2	Sin Collector			
	2	Immortal Servitude			
	3	_ Altar's Reap			
	2	Thraben Doomsayer			
	1	Bloodthrone Vampire			
	3	Tragic Slip			
	4	Champion of the Parish			
DCI #:	1	Imposing Sovereign		# in deck:	d: (Magic: up to 15) <u>Card Name:</u>
	1	Grand Abolisher		# III deck.	Dictate of Erebos
				1	Dictate of Heliod
				1	Athreos, God of Passage
				1	Mirrorweave
				1	Mimic Vat
Je:					
First Name:					
Firs					
		-			
		-			
		-			
				Total Numb	er of Cards in Sideboard:
. <u>.</u>				FOR OFFICIAL USE ONLY	Main/SB: /
Last Name:				Deck Check Rd #:	Deck Check Rd #:
Last	Total Numb	(6   1   11   15	37	Status:	Status: