DECK REGISTRATION SHEET

First Letter of
Last Name



Date:	Event:	
Location:	Deck Name:	
	 Dock Docianor	

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Ded	ck: (Magic: 60 Minimum)		Main Dec	k Continued & Basic Lands:	
	# in deck:	Card Name:		# in deck:	Card Name:	
	4	Caves of Koilos				
	2	Plains				
	12	Swamp				
	3	Temple of Silence				
	1	Athreos, God of Passage				
	4	Bloodsoaked Champion				
	4	Gnarled Scarhide				
	4	Herald of Torment				
	4	Mogis's Marauder				
	4	Pain Seer				
	2	Spiteful Returned				
#	4	Tormented Hero		<u></u>		
DCI #:	3	Sorin, Solemn Visitor			d: (Magic: up to 15) <u>Card Name:</u>	
	4	Hero's Downfall		# III deck.	<u>Cara Name.</u>	
	3	Thoughtseize				
	2	Murderous Cut				
		- Maraereae eat	-			
.: ::						
First Name:						
First						
					_	
				Total Numbe	er of Cards in Sideboard:	0
ie:				FOR OFFICIAL USE ONLY	Main/SB: /	
Last Name:		г		Deck Check Rd #:	Deck Check Rd #:	
Last	Total Numb		60	Status:	Status:	