DECK REGISTRATION SHEET

First Letter of Last Name



Date:		Event:	
Location:		Deck Name:	
LICINIC I	INCLICIT CADD MANAEC	Deck Designer	

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main Ded	ck: (Magic: 60 Minimum)		Main Dec	k Contin	ued & Basic	Lands:
	# in deck: Card Name:			# in deck: Card Name:			
	2	Temple of Silence					
	3	Forest					
	2	Plains					
	3	Swamp					
	4	Temple of Malady					
	4	Windswept Heath					
	4	Sandsteppe Citadel					
	4	Siege Rhino					
	4	Satyr Wayfinder					
	4	Underworld Coinsmith					
	4	Courser of Kruphix					
DCI#:	4	Grim Guardian		Sideboar	d· (Magic	un to 15)	
	4	Nyx Weaver		# in deck:	Card Name		
	4	Brain Maggot		4		of Blossoms	
	4	Commune with the Gods		2	Agent of	f Erebos	
	4	Rally the Ancestors		2	Eidolon	of Rhetoric	
	2	Kruphix's Insight		3	Nyx-Fle	ece Ram	
				4	Crux of	Fate	
me:							
First Name:							
正							
							15
				Total Numb	in Sideboard:		
me:				FOR OFFICIAL USE ONLY		Main/SB:	/
Last Name				Deck Check Rd #:		Deck Check Rd #:	
Las	Total Numb	per of Cards in Main Deck:	60	Status: Judge:		Status: Judge:	