DECK REGISTRATION SHEET

F	irst Letter of	f
	Last Name	2



Date:		Event:	
Location:		Deck Name:	
		Dock Docianor	

PRINT CLEARLY USING ENGLISH CARD NAMES

	Main De	ck: (Magic: 60 Minimum)		Main Dec	ck Continued & Basic Lands:
	# in deck:	Card Name:		# in deck:	Card Name:
	4	Elvish Visionary			
	4	Dutiful Attendant			
	4	Fleshbag Marauder			
	4	Nantuko Husk			
	4	Undead Servant			
	3	Outland Colossus			
	4	Reave Soul			
	1	Liliana, Heretical Healer			
	4	Cruel Revival			
	2	Evolutionary Leap			
	4	Read the Bones			
#	12	Swamp		<u> </u>	
DCI #:	10	Forest			d: (Magic: up to 15) Card Name:
				# III deck:	Card Name:
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ä					
First Name:					
First					
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				Total Numb	er of Cards in Sideboard:
.:				FOR OFFICIAL USE ONLY	Main/SB: /
Last Name:				Deck Check Rd #:	Deck Check Rd #:
Last	Total Numb		60	Status:	Status: