

School Sport NZ 2026 Cup and Carnival TEAM ROSTER



INSTRUCTIONS

- This roster must be completed for all Cup and Carnival events.
- All students must be listed with accurate ENROL dates and eligibility indicators, please see [SSNZ eligibility criteria](#)
- Attach all required documents as outlined in the Required Attachments Checklist.
- Submit this roster to the Event Provider with your team entry on or before the due date.

TEAM DETAILS

School:	
Event / Sport:	
Age Group / Grade:	
Coach / Manager – name and email:	
Team roster submitted by – name and email:	If different from above

REQUIRED ATTACHMENTS CHECKLIST

(Tick only the confirmations relevant to your team and ensure they are attached when submitting your roster)

HOST / ATTACHED SCHOOL RELATIONSHIP

- Host School Agreement Approval (Form 5)

COMPOSITE SCHOOL RELATIONSHIP

- Composite Team Agreement Approval (Form 6)

OTHER

- Form 9

MEDIA / LIVESTREAMING OPT-OUT

Schools may choose to opt out of livestreaming or media coverage for individual students or the entire team on the grounds of student wellbeing or safety. Where a school elects to opt out, event providers must ensure that the student/team is not included in any broadcast, livestream, promotional content, or on-court/field microphones.

- Our school elects to opt this team out of all livestreaming and media coverage.**

Where a school, team, or individual is opted out, the Event Provider must ensure that no member of the team or individual appears in any livestream, broadcast, recording, promotional content, or other media capture. This opt-out must not result in any disadvantage to the team or individual regarding scheduling, seeding, or draw allocation.

PRINCIPAL ATTESTATION

I attest that all students listed are bona fide full-time students at this school, meet all eligibility requirements of the SSNZ 2026 Eligibility Regulations, and that all information provided is true and correct.

Where a Host/Attached School Agreement applies, I confirm that the agreement has been approved by SSNZ and all students meet the conditions of that agreement.

Where a Composite Team Agreement applies, I confirm that the agreement has been approved by SSNZ and all students meet the conditions of that agreement.

I acknowledge that all persons associated with this team are bound by the SSNZ Integrity Framework.

Principal Name: _____

Signature: _____

Date: _____

EVENT PROVIDER VERIFICATION (for official use)

Eligibility documentation received and verified (Yes / No):	
Verified by:	
Date:	