



Region Carolina Regional Volleyball
Club Gaston Galaxy Volleyball Club
Season 2025 - 2026 Volleyball Season
Division Girls 14's
Team Name Galaxy 14 Leigh
Team Code G14GALXY2CR
Team Fee Paid
Team Contact Leigh Kiser • 7042876995



OFFICIAL ROSTER

Players

Credentials: J = Jr Line Judge, 2 = Jr R2, S = Jr Scorer, L = Jr Libero Tracker, 1 = Jr R1

| # | Name | DOB | Membership # | Eligible | Credentials | | | | |
|---|----------------------|---------|--------------|-------------------|---------------|--------------------------|----------|--------|---------|
| | Carnes, Shelby | 11/2011 | 5084202 | 12/15/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Faires, Elise | 11/2011 | 5316202 | 11/19/25 - 9/1/26 | | <input type="checkbox"/> | Carnes | Faires | Johnson |
| | Johnson, Mackenzie | 08/2011 | 5144025 | 11/24/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Malton, Ellis | 06/2012 | 4896947 | 11/19/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Pawlish, Layla | 04/2012 | 4897725 | 12/15/25 - 9/1/26 | | <input type="checkbox"/> | Pawlish | Price | Shipman |
| | Price, Anslee | 03/2012 | 5084075 | 11/17/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Shipman, Peyton | 02/2012 | 5345653 | 12/24/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Thomas, Anna Kate | 02/2012 | 4898759 | 12/28/25 - 9/1/26 | | <input type="checkbox"/> | | | |
| | Upchurch, Mary Ellis | 07/2011 | 4931797 | 12/19/25 - 9/1/26 | J, 2, S, L, 1 | <input type="checkbox"/> | Upchurch | Walker | |
| | Walker, Maggie | 12/2011 | 5038014 | 11/17/25 - 9/1/26 | | <input type="checkbox"/> | | | |

Staff

| Name | Title | Membership # | Eligible | Credentials | |
|---------------|-----------------|--------------|-------------------|-------------|--------------------------|
| Hawkins, Abby | Assistant Coach | 5348516 | 1/2/26 - 9/1/26 | | <input type="checkbox"/> |
| Kiser, Leigh | Head Coach | 2817057 | 12/20/25 - 9/1/26 | | <input type="checkbox"/> |
| MALTON, JILL | Assistant Coach | 5314644 | 11/21/25 - 9/1/26 | | <input type="checkbox"/> |
| Sloan, Todd | Assistant Coach | 2886923 | 11/17/25 - 9/1/26 | | <input type="checkbox"/> |

The person signing this form verifies that:

1. The above roster information is correct and contains all players and staff who will be participating in the event. All players and staff meet requirements.
2. The team understands it is subject to any and all penalties if this roster does not match the participants attending the event, regardless of who signs this verification.

Signature

Print name

Phone

Date