DECK REGISTRATION SHEET

First Letter of Last Name

Date:		Event:	
Location:		Deck Name:	B
		Deck Designer:	

PRINT CLEARLY USING ENGLISH CARD NAMES

DCI #:

First Name:

Last Name:

Main Deck: (Magic: 60 Minimum)

# in deck:	Card Name:
3	Skirsdag High Priest
3	Victim of Night
3	Bloodflow Connoisseur
4	Geralf's Messenger
2	Tragic Slip
4	Diregraf Ghoul
3	Highborn Ghoul
4	Gravecrawler
21	Swamp
1	Killing Wave
4	Blood Artist
2	Falkenrath Noble
3	Butcher Ghoul
3	Dead Weight

Total Number of Cards in Main Deck: 60

Main Deck Continued & Basic Lands:

# in deck:	Card Name:

Sideboard: (Magic: up to 15)

# in deck:	Card Name:
1	Killing Wave
2	Human Frailty
1	Dead Weight
2	Bloodline Keeper
4	Crypt Creeper
3	Appetite for Brains
2	Undying Evil

Total Number of Cards in Sideboard: 15

FOR OFFICIAL USE ONLY	Main/SB: /
Deck Check Rd #:	Deck Check Rd #:
Status:	Status:
Judge:	Judge: