DECK REGISTRATION SHEET

First Letter of Last Name

Date:		Event:	
Location:		Deck Name:	BR
		Deck Designer:	

PRINT CLEARLY USING ENGLISH CARD NAMES

DCI #:

First Name:

Last Name:

Main Deck: (Magic: 60 Minimum)

# in deck:	Card Name:
4	Dragonskull Summit
4	Geralf's Messenger
10	Swamp
4	Sign in Blood
4	Blackcleave Cliffs
2	Fume Spitter
4	Diregraf Ghoul
3	Tragic Slip
3	Geth's Verdict
4	Falkenrath Aristocrat
4	Blood Artist
2	Flames of the Firebrand
2	Gut Shot
4	Gravecrawler
3	Mortarpod
3	Cavern of Souls

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:
3	Shatter
2	Gut Shot
3	Liliana of the Veil
2	Skirsdag High Priest
3	Zealous Conscripts
2	Go for the Throat

Total Number of Cards in Sideboard: 15

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