DECK REGISTRATION SHEET

First Letter of Last Name

Date:		Event:	
Location:		Deck Name:	UBRG
		Deck Designer:	

PRINT CLEARLY USING ENGLISH CARD NAMES

DCI #:

First Name:

Last Name:

Main Deck: (Magic: 60 Minimum)

# in deck:	Card Name:
4	Balustrade Spy
4	Chancellor of the Annex
1	Flayer of the Hatebound
4	Golgari Grave-Troll
4	Golgari Thug
4	Ichorid
4	Narcomoeba
4	Nether Shadow
4	Phantasmagorian
4	Shambling Shell
4	Stinkweed Imp
4	Street Wraith
4	Bridge from Below
3	Cabal Therapy
4	Dread Return
4	Gitaxian Probe

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	Cabal Therapy
4	Contagion
4	Leyline of Sanctity
4	Leyline of the Void
2	Sickening Shoal

Total Number of Cards in Sideboard: 15

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