DECK REGISTRATION SHEET

First Letter of Last Name

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

PRINT CLEARLY USING ENGLISH CARD NAMES

DCI #:

First Name:

Last Name:

Main Deck: (Magic: 60 Minimum)

# in deck:	Card Name:
4	Inkmoth Nexus
1	Mimic Vat
4	Tumble Magnet
3	Contagion Clasp
4	Plague Myr
4	Grasp of Darkness
3	Go for the Throat
4	Phyrexian Crusader
3	Virulent Wound
4	Skithiryx, the Blight Dragon
2	Sword of Feast and Famine
4	Phyrexian Vatmother
20	Swamp

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:
2	Memoricide
1	Virulent Wound
1	Contagion Clasp
1	Go for the Throat
4	Corpse Cur
3	Mimic Vat
3	Ratchet Bomb

Total Number of Cards in Sideboard: 15

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