

INTERNATIONAL SOFTBALL CONGRESS Official 2012 ISC World Tournament Roster Form

This form is to be sent to the email addresses below on or before May 1, July 13 and August 6.

	Team: (Team name, city, state/province)		Waterdown Hammer D						Date:		Team No.		
	Manager Name:	E-mai	il address:	chambers	s@mdp.on.ca				Jersey colors:	Blue	Black		
	Manager Address:	Ontario							Zip/Postal: L7P 4B8				
	Home Phone:	ome Phone: 905-336-7745								Hotel Phone:			
	Cell Phone:	905-483-1077 ** Cell Phone must be someone w						ire tourna	ment and car	be contacted da	y or night**	•	
	Player Names	layer Names (18) Player Limit except for Legen			nds Teams Out of					Family Members Passes (Names)*			
	Last Name	First Name	Uniform#	Position	Region	PRAWN	Newcomer	City, State	Province	*must have the sa	me address as pla	ıyer	
-	Neill	Tim	2	Pitcher			,	Woodstocl	k, Ontario				
2-	Scott	Gord		Pitcher				Burlingtor	ı, Ontario				
3-	Hurst	Jim	23	Pitcher				Misissaug	a, Ontario				
ļ-	Pullin	Mike		Inf/Pitcher			,	Woodstoc	k, Ontario				
š-	Cameron	Mark	35	Catcher				Cambridge	e, Ontario				
5 -	Davis	Kyle	21	1B				Beamsville	e, Ontario				
7 _	Hornby	Geoff	22	1B				Guelph, O	ntario				
3-	Lake	Will	4	SS/2B				Guelph, O	ntario				
)_	Coe	Tim	27	SS/2B				Burlingtor	, Ontario				
0-	Young	Jason	11	Inf				Etobicoke	, Ontario				
1-	Gillis	Steve	29	3B/DH				Hamilton,	Ontario				
2-	Curtis	Darrin	3	Utility				Misissaug	a, Ontario				
3-	Prowse	Brian	24	OF				Burlingtor	, Ontario				
4-	Demasi	Dominic		Utility				Etobicoke	, Ontario				
5-	Morrison	Cory		OF				Ottawa, O	ntario				
6-	Witzel	Brett		Catcher			,	Woodstocl	k, Ontario				
7-	Pender	Brad		CF			(Cobden, C	Intario				
8-													
	Legends teams only are al	egends teams only are allowed twenty (20) players.											
19													
20													
	List below those personnel directly affiliated with your team to whom passes should be issued. These should not include fans, relatives (unless specifically fulfilling that function), news media, etc. Children under 12 must be accompanied by a pass-carrying adult at the gate.												
	mat function), news n	iust be accompanied by a pass-ca			rrying addit at the gate.				Family Member	s Passes (Name	·s)*		
		First Name			Uniform # City, State/Province				*must have the				
-	Field manager	Chambers	Peter			19	Burlington, Ontario			-			
2-	Coach	Withnell	Larry			12	Burlington, Ontario						
3-	Coach												
ŀ-	Scorekeeper												
-	Trainer	II .	ll			ll .	II			II			

All teams should attach their completed roster form to an email and send to the below email addresses.

Outlook and Outlook Express users can click on the first email address below to create an email. Then attach your roster and send.

iscstat@hotmail.com, iscken@comcast.net, blairjs@rogers.com, ftode739@rogers.com, hdewild44@gmail.com, aldoran42@hotmail.com, kbeane8@yahoo.com, lachdavid@gmail.com

E-mail to: