

## INTERNATIONAL SOFTBALL CONGRESS Official 2013 ISC World Tournament Roster Form



This form is to be sent to the email addresses below on or before May 1. July 15 and August 5.

	Team: (Team name, city, state/province)		Kitchener Cubs, Ontario Date:						01/05/2013	Team No.		
	•											
	Manager Name:	E-mail address: thomson.brad@gmail.com							Jersey colors:	Blue & Grey		
	Manager Address:								Zip/Postal:	N2N 1X5		
	Home Phone:	519-954-1269	H	otel/Motel:						Hotel Phone:		
	Cell Phone:	** Cell Phone must be someone who will be at the entire tournament and ca								be contacted da	y or night**	
	Player Names	(18) Player Limit except for Leger	gends Teams Out of Newcomer							Family Members	Passes (Names)*	
	Last Name	First Name	Uniform #	Position	Region	PRAWN	to ISC	City, State	/Province	*must have the sa	me address as player	
1-	Baechler	Andy	1	IF				Cambridge	e, ON			
2-	McNevin	Tyler	2	IF			Х	Hagarsvill	le, ON			
3-	Dedman	Ryan	10	UT				Plattsville,	, ON			
4-	Phibbs	Allan	16	С				Hagarsvill	le, ON			
5-	McCaw	Aaron	18	OF			Х					
6-	Wagar	Scott	19	Р			Niagara-on-the-Lake, Ol					
7-	Gillow	Bob	22	OF		Х		Kitchener, ON				
8-	Hiller	Adam	23	IF				Kitchener, ON				
9-	Baechler	Grant	24	IF				Ayr, ON				
10-	Hofstetter	Travis	25	OF				Plattsville,	, ON			
11-	French	Ryan	27	Р				Kitchener,	, ON			
12-	Grant	Mike	34	OF				Toronto, C	ON			
13-	Thomson	Brad	43	IF				Kitchener,	, ON			
14-	Pratt	Dave	44	С				Kingston,	ON			
15-	Parks	Brandon	57	OF				Oshawa, C	ON			
16-	Mitchell	Dan	77	IF				Paris, ON				
17-												
18-												
	Legends teams only are all	lowed twenty (20) players.						1.				
L-19												
L-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. Total # of passes limited to 35.											
	that function), news med	na, etc. Children under 12 mus	i be accomp	bained by a	i pass-carry	ying adult a	at the gate.	. 10tal # 01	passes minted		s Passes (Names)*	
		Last Name First Name					Uniform # City, State/Province				same address as team official	
1-	Field manager	Thomson	Brad			43	Kitchener, ON					
2-	Coach											
3-	Coach											
4- 5	Scorekeeper											
5-	Trainer		tta ala 41. *		ad marts	former t-			6 the 1-1-	am ail a ddur		
	<u>All teams should attach their completed roster form to an email and send to the below email addresses.</u> 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, lfisher838@ameritech.net, blairjs@rogers.com, ftode739@rogers.com, hdewild44@gmail.com, aldoran42@yahoo.com,											
	E mail tax		<u>oo santen</u>	LOOHINGL, L			10001030	210g010.00		eginali.com, al		

E-mail to:

LHunt@visitguadcities.com