International Softball Congress

Official World Tournament Roster Form

Team Name:	EAST HANTS MASTODONS	City of Operation:	LANTZ	State/Province	NS	TEAM #	
Manager Name:	DARCY CAMPBELL	Address Street/City:	14 WHISPER WOOD LANE, ENFIELD	State/Province	NS	Zip/Postal:	B2T 1H1
Cell Phone:	902-476-8882	Email:	EHDONS@GMAIL.COM			Jersey colors:	BLACK / ROYAL BLUE
		Out of Region Exception:				Date:	MAY 07/26

Please certify you have visited the CDC website and reviewed the concussion protocol information: ☑ Check

Name of person with concussion training: CHRIS HOPEWELL

Participants engaging in softball and activities incidental to softball do so with knowledge of the danger involved and agree to accept any and all inherent risks of property damage, personal injury, or death. Participants and spectators assume all risk and danger of personal injury, losses, damages to person or property and all hazards arising from, incidental to or related in any way to the game of softball. In addition to giving full consent for my participation, I do hereby waive, release and hold harmless the International Softball Congress, its officers, coaches, sponsors, supervisors and representatives for any injury that may be suffered by me in the normal course of participation in the designated sport and activities incidental thereto, whether the result of negligence or any other cause.

List those personnel directly affiliated with your team for whom passes should be issued. These should not include fans, relatives (unless specifically fulfilling a team function) or other non-team members.

	Player Names Last Name	First Name	Uniform #	Position	Out of Region	PRAWN	Newcomer to ISC	City / State / Province	PLAYER SIGNATURE REQUIRED FOR PARTICIPATION
1									
2	FRASER	BRODY	7	IF/P			N	NINE MILE RIVER / NS	
3	WILLIAMS	TYLER	9	C / OF			Y	SHUBENACADIE / NS	
4	SEARS	ROWAN	11	SS			N	TRURO / NS	
5	DENNY	LEVI	21	2B			Y	ESKASONI / NS	
6	WATSON	DAVID	22	P			N	MILFORD / NS	
7	PATTON	CAMERON	27	C			N	TRURO / NS	
8	SINGER	WILLIAM	47	OF			Y	SHORTTS LAKE / NS	
9	Bures	Vinnie	44	OF	Y		Y	Czech	
10	PETERS	NATHAN	57	IF			Y	LANTZ / NS	
11	CAMPBELL	TY	62	IF / OF			Y	ENFIELD / NS	
12	CROWELL	COBY	81	OF			N	BROOKFIELD / NS	
13	BOUMA	CALLUM	92	IF / OF			Y	TRURO / NS	
14	Weatherbee	Camden	12	IF/OF			Y	Truro/NS	
15	Maguire	Keegan	14	P			Y	Valley/NS	
16									

	Last Name	First Name	Uniform #	City / State / Province	SIGNATURE REQUIRED FOR PARTICIPATION
Field manager:	HOPEWELL	CHRIS	18	LANTZ / NS	
Coach:	JEFFERY	FRASER	0	NINE MILE RIVER . NS	
Coach:					
Coach:	CAMPBELL	DARCY	88	ENFIELD / NS	
Sponsor:					
Trainer:					

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

Email to: blairjs@gmail.com, richhaldane@gmail.com, gnydick@gmail.com