



# International Softball Congress



## Official World Tournament Roster Form

Team Name:  City of Operation:  State/Province:  TEAM #

Manager Name:  Address Street/City:  State/Province:  Zip/Postal:

Cell Phone:  Email:  Jersey colors:

Out of Region Exception:  Date:

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

Yes

Name of person with concussion training:

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.

Last Name	Player Names		Uniform #	Position	Out of Region	PRAWN	Newcomer to ISC	City / State / Province	PLAYER SIGNATURE REQUIRED FOR PARTICIPATION
	First Name								
1	BROWNE	MATT	1	P			X	BRAMPTON, ON	
2	WEIR	NOAH	2	P/1B				EDEN MILLS, ON	
3	CURTIS	DARRIN	3	3B/DP				GEORGETOWN, ON	
4	WILLIAMS	WARREN	TBD	C				PUSLINCH, ON	
5	GALLO	JJ	5	2B				GUELPH, ON	
6	JEFFERSON	DAVID	11	UTILITY				TORONTO, ON	
7	HATCH	MATT	26	UTILITY				STRATFORD, ON	
8	RASMUSSEN	ERIK	13	UTILITY				TORONTO, ON	
9	BLAIR	JOHN	16	CF				HAMILTON, ON	
10	NYMAN	PATRICK	19	UTILITY			X	GUELPH, ON	
11	VIOL	BRANDON	24	SS				DUNDALK, ON	
12	WEIR	LIAM	28	C				GUELPH, ON	
13	RORIE	KEVIN	29	OF			X	DUNDAS, ON	
14	WILLIAMS	JUSTIN	TBD	OF			X	BURLINGTON, ON	
15	FISCHER	MAC	TBD	P				TEESWATER, ON	
16	NEEB	RYAN	34	INF			X	ELMIRA, ON	

	Last Name	First Name	Uniform #	City / State / Province	SIGNATURE REQUIRED FOR PARTICIPATION
Field manager:	MCCAIG	KYLE	4	GUELPH, ON	
Coach:	WEIR	NOAH	2	EDEN MILLS, ON	
Coach:	JEFFERSON	DAVID	11	TORONTO, ON	
Coach:	GALLO	JJ	5	GUELPH, ON	
Sponsor:	GALLO GROUND SUPPORT				
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