					S World Tou			Congre	ss 🏔	2015
6		This form is to be sent to								SOUTH BEND
	Team: (Team name, city, state/province)	Tavistock Merchants	ine email a	addresse	s below on o	Team No.	v 15. Julv	Date:	May 13,2015	
	Manager Name:	Rick Innes		F-ma	il: mackenzie.		mail com	Jersey colors:		Blue, Red
		37th Line, Embro, ON		<u></u>				Zip/Postal:		2100, 1100
		519-655-3392					Hotel Phone:			
Home Phone:			Hotel/Motel:					Hotel Phone:		
Cell Phone: 519-275-4271 ** Cell Phone must be someone who can be contacted day or night**										
	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 may be suffered by me in the normal course of participation in the designated sport and the activities incidental thereto, whether the result of negligence or any other cause.									jury that
	List those personnel directly a	affiliated with your team to whom pa	sses should b	e issued.	These should n	ot include fans	, relatives (u	nless specifically fulfilling a team function	<u>ı), news media, etc.</u>	
	Player Names	(18) Player Limit except for Legends Teams			Out of		Newcomer	City, State	- PLAYERS SIGNAT	
	Last Name	First Name	Uniform #	Position	Region	PRAWN	to ISC	Province	REQUIRED FOR PARTI	CIPATION
<u>1</u>	Innes	Danny	27	U				New Hamburg, ON		
<u>2</u>	vanBoekel	Taylor	96	IF				Tavistock, ON		
<u>3</u>	Kalbfleisch	Mac	16	IF				Tavistock, ON		
<u>4</u>	Munro	Jeremy	91	OF				Embro, ON		
<u>5</u>	Jantzi	Jarris	68	IF				New Hamburg, ON		
<u>6</u>	Ohearn	Dan	9	U				Tavistock, ON		
<u>7</u>	Herald	Ross	24	C				Tavistock, ON		
<u>8</u>	Fink	Chad	00	P				Sebringville, ON		
<u>9</u>	Malson	Charlie	6	IF				Tavistock, ON		
<u>10</u>	МсКау	Chris	7	U				Tavistock, ON		
<u>11</u>	Kropf	Quin	84	P				Tavistock, ON		
<u>12</u>	Annis	Chad	8	IF				Tavistock, ON		
<u>13</u>	Ruston	Tim	39	OF				Gads Hill, ON		
<u>14</u>	Ramseyer	Travis	11	U				Tavistock, ON		
<u>15</u>	lan	Baer	21	U				Hickson, ON		
<u>16</u>	Brent	Lange	19	IF				Tavistock		
<u>17</u>										
<u>18</u>										
	Legends teams only are allowed twent	ty (20) players.	1							
<u>19</u>		_	-							
<u>20</u>]				
		Last Name	First Name	Uniform	1	City, State/Pr	ovince			
	Field manager	Innes	Rick		Embro	ON				
	Coach									
	Coach									
	Coach									
	Sponsor/Trainer									
	All teams should attach their con						_			
Outlook and Outlook Express users can click on the first email address below to create an email. Then attach your roster and send.										
E-mail to: iscstat@hotmail.com, iscfastpitch@gmail.com, blairjs@gmail.com, ftode739@rogers.com, hdewild44@gmail.com, aldoran42@yahoo.com,										