



International Softball Congress



Official ISC Legends Roster Form

Team Name:	Bear Creek Storm	City of Operation:	St Thomas	State/Province:	ON	TEAM #	
Manager Name:	Kelly-Jo Murphy	Address Street/City:	9 Dieppe Dr St Thomas	State/Province:	ON	Zip/Postal:	N5R 4G4
Cell Phone: Available 24/7	519 504-1921	Email:	murphykellyjo@hotmail.com	Date:	July 15, 2025	Jersey colors:	Black/ Grey

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

Name of person with concussion training: Kelly-Jo Murphy

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		Uniform #	Position	Date of Birth:	Newcomer to ISC	City / State / Province	PLAYER SIGNATURE REQUIRED FOR PARTICIPATION
	Last Name	First Name						
1	Beecroft	Dan	6	P	09-03-1972	N	St Thomas/ Ontario	
2	Dawdy	Jason	1	P	14-07-1974	N	Middlemarch, Ontario	
3	Crocker	Brent	18	P/IF	07-05-1974	N	St Thomas/ Ontario	
4	Wismer	Chris	77	OF	01-10-1972	N	Port Stanley/ Ontario	
5	Kelly	Rob	31	C	1972-12-23	N	New Hamburg/ Ontario	
6	Bernard	Rob	43	UTIL	11-09-1967	N	Whycomagh/ Nova Scotia	
7	Mcperson	Jeff	2	C	13-05-1973	N	Shedden/ Ontario	
8	Parsons	Todd	15	C	04-05-1973	N	Garson/ Ontario	
9	Hallyburton	Jason	7	OF	01-06-1972	N	St Thomas/ Ontario	
10	Rick	Troy	12	UTIL	09-12-1967	N	Port Stanley/ Ontario	
11	Pearce	Shawn	50	IF	22-09-1970	N	Woodstock/ Ontario	
12	Unwin	Mike	44	IF	02-07-1975	N	Fingal/ Ontario	
13	Edie	Tom	29	UTIL	11-09-1966	N	St Thomas/ Ontario	
14	Campbell	Scott	23	UTIL	29-06-1960	N	Glencoe/ Ontario	
15	Burns	Rob	27	IF	30-01-1970	N	St. Thomas/ Ontario	
16	Smith	Jason	11	UTIL	15-12-1971	N	Deleware/ Ontario	
17	Ross	Mel	21	P	10-01-1973	N	Waterloo/ Ontario	
18	Wilcox	Jeff	25	OF	06-07-1973	N	Fingal/ Ontario	
19	Assance	Curtis	54	UTIL	05-09-1966	N	Christian Island/ Ontario	
20								

	Last Name	First Name	Uniform #	City / State / Province	SIGNATURE REQUIRED FOR PARTICIPATION
General Manager:	Murphy	Kelly-Jo		St Thomas/ Ontario	
Coach:	Edie	Tom	29	St Thomas/ Ontario	
Coach:	Cambell	Scott	23	Glencoe/ Ontario	
Assistant Trainer:	Willcox	Mel		London/ Ontario	
Massage Therapist	Crocker	Hillary		Baden/ Ontario	
Trainer:	Ruddock	Megan		Port Stanley/ Ontario	

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

E-mail to: iscfastpitch@gmail.com, blairjs@gmail.com, sb.woody.coach72@att.net, ck.woodruff@att.net