



Mike Kolean Men's Softball Tournament Roster

Team Name: _____

Manager's Name: _____

Address: _____ City: _____ Zip: _____

Home: _____ Cell: _____ Work: _____ Fax: _____

E-Mail Address: _____

ROSTER: *Any changes must be approved by the director*

NAME

PHONE

SHIRT SIZE

SM, MED, LG, XL, XXL, XXXL

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____

8) _____

9) _____

10) _____

11) _____

12) _____

13) _____

14) _____

15) _____