

			Northern California Senior Softball Association	
			NCSSA	APPROVED
	AGE GROUP		2017 Official Roster	
	(Assistant Manager)		(Manager)	
		NAME		
		ADDRESS		
		City, St Zip		TEAM NUMBER
		EMAIL		
		PHONE(S)		
	LAST NAME - FIRST NAME	X	ADDRESS - CITY - STATE - ZIP CODE	BIRTH YEAR
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22				
Add				
Add				
	RECENT ADDITIONS		X -- PLAYER IS ON 2 ROSTERS	