

# CHEYENNE JUNIOR LEAGUE 2018 ALL-STAR TRYOUTS

(Please write legibly)

Player Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Age as of April 30, 2018: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Bats: \_\_\_\_\_ Right

\_\_\_\_\_ Left

Throws: \_\_\_\_\_ Right

\_\_\_\_\_ Left

Rec baseball Experience: \_\_\_\_\_ Competitive baseball Experience: \_\_\_\_\_

Team Played last season: \_\_\_\_\_

Positions Played: \_\_\_\_\_

Medical history coaches need to be aware of:

\_\_\_\_\_  
.....

Parents Names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address: \_\_\_\_\_@\_\_\_\_\_

Please clearly Phone (H): \_\_\_\_\_

Fill in all contact (W): \_\_\_\_\_

Information to be (C): \_\_\_\_\_

Notified of results

Emergency Contact: \_\_\_\_\_ No. \_\_\_\_\_

