

# Austin Slam Baseball

## Player Tryout Form

Please have parent fill out legibly

Date: \_\_\_\_\_

Player's cell number: \_\_\_\_\_ Parents E-mail: \_\_\_\_\_

Player's Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City Zip

Date of Birth: \_\_\_/\_\_\_/\_\_\_ High School: \_\_\_\_\_ Graduating Yr. \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Bats: \_\_\_\_\_ Throws: \_\_\_\_\_

Do you play other sports in high school? If yes, which sports. \_\_\_\_\_

Where did you play last summer? \_\_\_\_\_

Positions you play at high school: (1) \_\_\_\_\_ (2) \_\_\_\_\_

Preferred Positions: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

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Father: \_\_\_\_\_ Hm Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Wk Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mother: \_\_\_\_\_ Hm Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Wk Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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