

MICHIGAN HIGH SCHOOL SOFTBALL COACHES ASSOCIATION
2019 Nomination Form

Position **Catcher**

Region# _____ Selection Order _____

Division _____

Phone numbers will only be used to contact players for awards and All Star Games

Name: _____

Grade: _____ Favorite Number: _____

Shirt size (Mens Size) _____ Short Size _____
 S M L XL XXL

Parents: _____

Address: _____

City: _____ Zip: _____

Parents E-mail: _____

Phone: _____

Players Cell Phone: _____

Players Email: _____

Coaches Name: _____

High School: _____

Address: _____

City: _____ Zip: _____

Coach Phone: _____

Coaches E-mail: _____

STATS FOR THE 2019 REG SEASON ONLY

The majority of the innings played for the season must be at the position nominated for

At Bat _____ Hits _____ RBI _____ Sac _____

Runs _____ 1B _____ 2B _____ 3B _____

HR _____ SB _____ SO _____ OBA _____

Walks: _____ Batting Position _____ Batting Avg

Fielding Stats From the Position of Catcher Only

Stolen Bases Attempted _____ Runners Thrown Out _____

Assists _____ Putouts _____ Errors _____

Pass Balls _____ Fielding Average #DIV/0! Pick Offs _____

TEAM BATTING AVERAGE: _____ $\frac{\text{Hits}}{\text{At Bats}} = \text{BA}$

THE FORM MUST BE FILLED OUT COMPLETELY IN ORDER FOR THE PLAYER TO BE CONSIDERED

****YOU MUST INCLUDE PLAYER STATS FOR INDIVIDUAL GAMES FOR THE SEASON ON THE BACK OF THIS FORM****

Comments: Athletic & Academic Honors: _____

SENIORS ONLY - ALL STAR GAME

- The Association is sponsoring three Senior All Star Games.
- Players will be chosen by the order of their selection to the All State Team. Honorable Mention and possibly all Regional Team players may be used.
- When an athlete accepts the invitation to participate the financial obligations is \$100.00 to be paid by the coach.

By signing below, I acknowledge and accept the responsibility for the sponsor fee of \$100.00 for the senior athlete nominated on this form. Failure to sign will result in the above player not being selected to the all star game. Payments must be made by September 1 after that date the cost will increase \$25 per month until paid. The coach and High School will not be in good standing with the MHSSCA until fees are paid in full. Also by signing below I verify that all statistics are accurate to the best of my ability and understand that if these stats prove to be inaccurate, I may be penalized in any future All-State voting processes.

Coach Signature _____

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