



Player information: Filled out by player

Player

First Name

Last Name

TRYOUT NUMBER:

Player's Cell:

Player's Email:

Curent Team:

Age Group Tryout: 8 10 12 14 16 18

Graduation Year

Date of Birth / /

Position(s) You Play: || 1B || 2B || SS || 3B || RF || CF || LF ||=====|| Pitcher || Catcher



Bats Right / Left / Both

Home to 1B Time:

Home to 1B Time:

Throws Right / Left / Both

Over Hand Speed:

Over Hand Speed:

Catcher Pop Time

Catcher Pop Time

Catcher Pop Time

Parents Name

Dad:

Mom:

Parents Cell

Dad:

Mom:

Parents Email

Dad:

Mom:

High School Attending or will be attending:

Current Address:

City

State

Zip

DATE ____/____/____

NOTES:



Pitch Speed: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

Pitch Speed: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

Pitch Speed: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

Pitch Location: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

Pitch Location: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

Pitch Location: | Fast____ | Change____ | Screw____ | Curve____ | Drop____ | Rise____

