



Tryout Application

Name: _____

Date of Birth: _____ Grade: _____

Telephone Number: _____

Date: _____ Sport: 7th & 8th Girls Softball

TRYOUTS WILL BE HELD: Parish Center

Day & Date: March 12th 9am –Noon & March 14th 4pm – 6pm

Coach in Charge: Tom Ross & Tony Fazzolari

Team Membership: 7th & 8th Grade Girls

Practice schedule will be announced at the tryout dates

Student Signature: _____

Parent Signature: _____

Parents Email: _____

Approved by Nurse: _____ Date: _____

Meets eligibility standards: YES _____ NO _____

If no, reason: _____

Homeroom Teacher: _____ Date: _____

Please submit tryout application to Mr. Hoover (Athletic Director) by **March 9th**

**PLEASE MAKE SURE PHYSICAL IS UPDATED WITH MRS. DAVIS OR
STUDENT WILL NOT BE ALLOWED TO TRYOUT.**

5th thru 8th Grade Softball Clinic

Saturday March 5th 9am to Noon

Monday March 7th 6pm to 8pm

- **All in the Parish Center**