

Iowa High School Baseball Coaches Association

2018 ALL-STAR SERIES RECOMMENDATION FORM

SENIORS ONLY

Deadline: July 1, 2018

PHOTO OPTIONAL

LARGE EAST ()

LARGE WEST ()

SMALL EAST ()

SMALL WEST ()

NAME _____
LAST FIRST HOME PHONE / CELL PHONE

HOME ADDRESS _____

CITY _____ ZIP _____ DOB _____

HEIGHT _____ WEIGHT _____ AGE _____ TEAM RECORD _____

GRADE POINT _____ ACT SCORE _____ CLASS RANK _____

SCHOOL _____ NUMBER OF STUDENTS IN SCHOOL _____

PLAYERS POSITION _____ BATS _____ THROWS _____ UNIFORM # _____

HITTING: AB R H 2B 3B HR BB SO SB RBI FIELD% BAT AVE.

2016 _____

2017 _____

As of 7/1/2018 _____

ALL-CONFERENCE _____ ALL-DISTRICT _____ ALL-STATE _____

OTHER HONORS RECEIVED _____

PITCHING: WIN LOSS SV GP CG IP H R SO BB ERA

2016 _____

2017 _____

As of 7/1/2018 _____

COACH'S NAME _____ E-MAIL _____

HOME ADDRESS/CITY/ZIP _____

HOME PHONE _____ CELL PHONE _____

******\$250.00 MINIMUM SPONSORS FEES (IF CHOSEN) More would help to defray cost of All Star Series.
FEES DUE August 1, 2018 ******

SEND TO:

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