

putting  
OUR  
youth  
back  
into  
baseball



Reviving Baseball in Inner Cities™

## STUDENT ATHLETE NOMINATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Emergency Number: \_\_\_\_\_

DOB (MM/DD/YYYY): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  Male  Female

Team: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Division:  AAAA: 13-15 (15U)  AAA: 11-12 (12U)  AA: 9-10 (10U)

Position(s): \_\_\_\_\_ Bats/Throws: \_\_\_\_\_ / \_\_\_\_\_

Name of School: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Email Address: \_\_\_\_\_

Team Nominated For (*Select ONLY One*):  Urban All Star Weekend  Jr RBI Classic (12U Only)

This is only a coach's nomination. This does not mean the "Student Athlete" has made the team selected above. This nomination only means that the Officials of the Louisiana Youth Baseball programs will evaluate the "Student Athlete" for consideration on the team nominated for. This evaluation will consist of not only athletic ability but character, sportsmanship, and academics. The nominated "Student Athlete" must also participate in ALL Academic programs of Louisiana Youth Baseball. Failure to participate in the Academic programs will result in immediate disqualification from consideration. If selected to participate on the nominated team, the "Student Athlete" & parents/guardians will be required to complete all necessary forms and abide by all league deadlines and rules. If the "Student Athlete" & parents/guardians are unable to follow the program rules, the "Student Athlete" will be eliminated from consideration or from participation on team. To fully participate, the parents/guardians may be required to provide personal and confidential information pertaining to the "Student Athlete". This information will be held in the strictest confidentiality and used only for the purposes needed to fulfill the participation requirements in the program. I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state of Louisiana and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect. I am the parent or legal guardian of the Student Athlete. I am of legal age and am freely signing this Agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

I represent that I am the coach of the child named above and I agree that the terms of this release are binding on the child and me. I also hereby acknowledge that I have read and understand the League's Policies.

Nominating Coach Signature: \_\_\_\_\_ Date \_\_\_\_\_

**FOR LYB USE ONLY:** Birth Certificate:  Photo:  Report Card: