



ALL-STAR PLAYER APPLICATION **2025**

Player Name: _____ Division Trying Out For: _____

Player's Current Spring Division/Team Name: _____

Dri-Fit Shirt Size _____ Jersey Size _____ Jersey Name _____

Jersey # (1st Choice) _____ Jersey # (2nd Choice) _____ Jersey # (3rd Choice) _____

Parents, please indicate the appropriate selection(s) by placing your **initials** on the space(s) provided below. Thank you

1. _____ My child would like to be considered in the All-Star Team Selection, **BUT will / may miss the games and practices on/during the following dates:**

2. _____ My child would like to be considered in the All-Star Team Selection and CAN commit to all tournaments and practices.
3. _____ My child **DID NOT** participate on a Travel – Type team after **March 31, 2025.**
(According to the USA Softball Yellow Book, "Participation" is defined as a player taking part in a tryout, practice, practice game, scheduled game, friendly or tournament.)

The ALL-STAR PARENT COMMITMENT LETTER must accompany this ALL-STAR PLAYER APPLICATION and submitted to the League Player Agent at registration for the All-Star tryouts on **Sunday, May 4, 2025.**

Parent's PRINTED Name

Parent's Signature

Parent's Cell Number OR Best Number to Reach Parent

Player/Parent Home Address

Date