

2021 All-American GamesPlayer Registration Form

The information collected on this form will be forwarded to the USA Softball All-American Games tournament committee to use for player registration to the event. It is important that it is completed in a legible manner.

Region 6 – Midwest	Association Representing			
General Information				
First Name	Last Name		Date of Birth	
Parent's Names				
Email Address	Cell I	Phone		
Street Address	City		_ State	Zip
Softball Information				
2020 Team Name		Age Group		
Current Head Coach		Cell Phone		
Primary Position	Secondary Position			
Uniform Size (all adult sizes):	Jersey Pants			
<u>Questionnaire</u>				
Favorite part of softball				
Fun Fact about myself				· · · · · · · · · · · · · · · · · · ·
Most influential person in my li	fewhy?			
	players and parents are acknowledging n Oklahoma City if the player is selecte			
Parent/Guardian Signature _		Date		
Return this form along	with \$15 non-refundable fee to the t	yout host site y	ou plan to a	ttend upon check in.

Host Site: Normal, Illinois
Tryout Date: Sunday, April 25
Contact Person: Mike Egenes
Check payable at site to: "BNGSA"

Contact Info mike.egenes@gmail.com