WNSL BASEBALL ALL-STARCommitment Letter

1. I understand the importance of attending practice, and I will have my player at all practices, games and scrimmages unless a conflict arises. I understand that the head coach must be contacted prior to any absences.
2. I understand that the All-Star season will run from June through early July, and possibly later. Further, I understand that if my son cannot be available for the District and/or State tournaments, then he will be considered an alternate team member and not a regular team member.
3. I understand that it is the head coach’s decision as to what position each player will play. No one is guaranteed playing time. Playing time is earned through effort, attitude and performance in practices, scrimmages and games.
4. I understand that the equipment, uniform and administrative cost of participating on this All-Star team is $150.00 per player. This fee must be paid upon making a team. This includes a new uniform. If the player has an “All-Star” uniform, the fee is $100.
5. I understand that being part of this All-Star team is a privilege and not a right.
6. I understand that this All-Star team is a more intense baseball experience in which my player will further develop his baseball skills and knowledge of the game. Likewise, I understand that the values of having fun, developing friendships and developing a love for the game are still emphasized.

I have read all of the above and understand the expectations of this Commitment Letter.

Player’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player’s Age as of May 1, 2015:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Team:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Division:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Player’s Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information:

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home: \_\_\_\_\_\_\_\_\_\_\_ Work: \_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_