

**OKLAHOMA SLOW-PITCH
SOFTBALL COACHES ASSOCIATION
OFFICIAL ALL-STATE NOMINATION FORM**

**Completed Forms Due:
At All-State District Meeting**

**Wallet Size Photo Must Be
Attached Here**

**Attach label on back of picture
with player's name and school**

(circle) East or West District 1 2 3 4 Class 6A 5A 4A 3A 2A A

Full Name: _____

Home Address: _____

City: _____ Zip _____

Phone: (____) _____ Cell: (____) _____

Email Address: _____

School: _____

School Address: _____

City: _____ Zip _____

School Phone: (____) _____

T-Shirt Size: _____ (Adult Size) Height: _____

(circle) Throws: R / L Bats: R / L

Primary fielding Position: _____

Alternate fielding Position: _____

Coaches Name: _____

Home Address: _____

City: _____ Zip _____

Phone: (____) _____

Email : _____

STATISTICAL INFO - VARSITY GAMES ONLY (Career Stats NOT required)

BATTING

YEAR	AB	R	H	RBI	2B	3B	HR	BB	SO	SLG %	OBA	AVG
SENIOR												
CAREER												

FIELDING

PITCHING

YEAR	PO	A	E	FIELD %	YEAR	W	L	IP	SO	BB	ERA
SENIOR					SENIOR						
CAREER					CAREER						

In nominating this prospective All-Stater, I understand and assume the responsibility as coach in seeing that my nominee, if selected, will abide by the rules and regulations ascribed by the OSSCA. Coaches must be a member of the OSSCA to have an All-Stater. Player's personal information, stats, photo and meeting all deadlines is required for nomination.

Coaches Signature: _____

Athletic & Academic Honors and Rewards:
