

SOUTH JERSEY GIRLS SOFTBALL ASSOCIATION, INC.

TEAM HISTORY AND EVALUATION FORM
2008

TEAM NAME _____

COACH: _____ HOME PHONE # _____

E-MAIL _____ CELL PHONE # _____

DIVISION REQUESTED: SENIOR I SENIOR II JUNIOR O JUNIOR N JUNIOR A
JUNIOR P MAJOR I MAJOR II MINOR (circle one)

Number of girls that played at this level _____

Number of girls that played at a lower level _____

Number of new girls in SJGSA _____

Number of girls at each age: (Minors 9,10) (Majors 11,12) (Juniors 12,13,14,15) (Seniors 16,17,18)

AGE _____ NUMBER OF GIRLS _____

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AGE _____ NUMBER OF GIRLS _____

AGE _____ NUMBER OF GIRLS _____

Number of girls that are enrolled in your local organization in age bracket of requested team _____

Number of school players (estimated):

HS Varsity _____ JV _____ FRESH _____ MIDDLE/GRAMMAR _____

Number of girls playing on ASA, NSA, BABE RUTH, etc. teams _____

Names of Potential Pitchers for this team and teams they play on(school,asa,nsa,babe ruth etc.) _____

Will anyone on this team be double-rostered to another GSA Division team? _____

Coaches evaluation of this team: A: Highly competitive B: Somewhat competitive

C: Average competitiveness D: Weak

SIGNATURE OF COACH/TEAM REPRESENTATIVE _____

Please fill out all blanks to the best of your knowledge. Try to investigate all aspects of your team in order to best complete this form. This form will be used to help classify teams in Division.