



## Skyline Little League 2011 All-Star Player Application

Being named to represent Skyline Little League on an All-Star team is a privilege and not a right. It should reward those players who have had a successful season on the field, and are being recognized for their efforts. It is a reward for the few players who, based upon evaluations by the Managers of the division, demonstrate the best combination of the following:

- Playing ability (pitching, fielding, hitting and baseball sense)
- Character (sportsmanship and attitude)
- Dedication (willingness to practice, work hard and strive to achieve goals)

The Skyline Little League All Star teams will consist of the following:

- Junior Team
- 11-12 Team: Majors
- 10-11 Team: Majors
- 9-10 Team: Minors

Shirt Size:

- Adult
- Youth

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I understand that if I am chosen to participate on any Skyline Little League postseason team that I am expected to be at all practices, team meetings and postseason games, and that any unexcused absences may result in me being removed from the team roster and dropped from the postseason team.

**I understand that my participation on any Skyline Little League postseason team, whether it is practice, games or team meetings, takes priority over all other sports that I decide to participate in during the summer. I also understand that if there are any scheduling conflicts with my postseason team and any other sports activity I choose to participate in, and I choose to participate in the other activity, I will be removed from the postseason team roster and dropped from the postseason team.**

I understand that if I am chosen to participate on any Skyline Little League postseason team there is a possibility that I may only play three (3) consecutive defensive out and bat only one (1) time per game. The team manager and his coaching staff will determine playing time, and playing time will not be discussed with parents.

**I promise to honor the rules in this agreement.**

- I would like my child to play up a division if he has the opportunity.**

Name of participant: \_\_\_\_\_

Signature of participant: \_\_\_\_\_ Date: \_\_\_\_\_

**I promise to ensure that my child and I honor the rules in this agreement.**

**I understand there is a \$50.00 refundable deposit that is dependent on my child completing the entire postseason and attending ALL practices, team meetings, and games.**

Signature of parent/guardian \_\_\_\_\_ Date: \_\_\_\_\_