

N.S.W. JUNIOR BASEBALL LEAGUE Inc.
NOMINATION FORM
U/16 U.S.A. TOUR

Trials commence on: **at 9.30 am on SUNDAY 14 February, 2016**

at: Castle Glen Reserve, Ridgecrop Drive, Castle Hill

NSW Junior Baseball League is an independent League which has served Junior Baseball since 1990.

We are not currently affiliated with Baseball NSW or the A.B.F

Nominations close on Wednesday 10th February, 2016

send to: N.S.W. Junior Baseball League

P.O. Box 2020, North Parramatta 1750

Fax to: 9674 1969

contact@nswjuniorbaseball.com.au

REGISTER EARLY - there is a \$10 fee for late nomination.

Note: Players attending initial trials will be advised of additional trials including any mid-week trials if required.

**To check whether trials are still held in case of inclement weather:
Telephone the NSWJBL Information line - 1900 920 229 - line #3**

N.S.W.J.B.L. trials will select players for a team to visit America in July/August 2016 as part of our cultural exchange programme with IBA-BOYS. Players' ages must be under 16 years of age at 31.12.16. (2001-02 birthdates).

Children born in 1990 may be considered only if we have filled all positions in the Under 17 team.

Costs for the tour have not yet been finalised but will be not be more than \$3,300. Non-members are welcome to nominate if there are vacancies remaining after all applications from affiliated clubs have been placed in a team.

Should positions become available for players from Associations which are not currently affiliated with N.S.W.J.B.L. Inc. they will be a required to pay \$220 surcharge.

If selected payments will be made progressively up until 30 June 2016. Applications for additional time to pay will be considered in confidence by the League. The payment is all inclusive covering uniform, walkout gear, insurance, transport costs and contributions to coaching and general expenses. The team will enjoy a complete cultural experience; attending a Major League game and staying with local families during their stay.

Read more details on our website (www.nswjuniorbaseball.com.au) or on our Facebook Page.

CONSENT DECLARATION

I give my child permission to participate in the Trials and in subsequent activities if selected. If in the event of an accident or serious illness I cannot be contacted, I give permission for League officials to seek medical attention/ambulance on my behalf. I understand that the onus is on me as the parent/guardian of this player to follow NSWJBL procedures for notification of the use of any proscribed medication.

Signed:

Date:

SURNAME:

GIVEN NAME:

ASSOCIATION / CLUB:

DATE OF BIRTH:

**POSITIONS
NOMINATED:**

1

2

HOME ADDRESS:

HOME PHONE:

POST CODE:

MOBILE:

EMAIL: