

Please return this form to the Nebraska Coaches Association, 500 Charleston St Ste 2 Lincoln, NE 68508 by Thursday, October 25.

Booster's Name (if applicable): \_\_\_\_\_  
(AS IT SHOULD APPEAR IN THE PROGRAM) (**send tickets if not selected – YES or NO – circle one**)

Booster's Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Player School: \_\_\_\_\_ Uniform # \_\_\_\_\_ CLASS: A B C

Player Name: \_\_\_\_\_ Position \_\_\_\_\_

Player Address: \_\_\_\_\_ City/ZIP \_\_\_\_\_

Player Phone: (\_\_\_\_\_) \_\_\_\_\_ Player Email: \_\_\_\_\_

The advisory committee has requested statistics on the player you nominate. Please fill in the information where applicable.

**Player Stats:**

Career Games \_\_\_\_ Batting Ave. \_\_\_\_ Runs \_\_\_\_ RBI \_\_\_\_ Fielding Ave \_\_\_\_ Stolen Bases \_\_\_\_ Home Runs \_\_\_\_

Sr. Year Games \_\_\_\_ Batting Ave. \_\_\_\_ Runs \_\_\_\_ RBI \_\_\_\_ Fielding Ave \_\_\_\_ Stolen Bases \_\_\_\_ Home Runs \_\_\_\_

**Pitcher Stats:**

Career W/L record \_\_\_\_ ERA \_\_\_\_ Innings \_\_\_\_ Strikeouts \_\_\_\_

Sr. Year W/L record \_\_\_\_ ERA \_\_\_\_ Innings \_\_\_\_ Strikeouts \_\_\_\_

**Your validation & responsibility as a coach:** I hereby certify that the above player is a senior and will graduate from high school by June, 2019. I recommend this player as being of exemplary character on and off the field. **If this player is selected, I understand I will be asked to raise \$250.00 from individuals, school groups, and/or local firms in support of this player participating in the All-Star game.**

\_\_\_\_\_  
(HEAD coach signature required) (please print name)

**Nominate a coach for the All-Star game** \_\_\_\_\_  
Name School

SB