



Bayside High School
Baseball Student Information Sheet

Players Name: _____

Current Grade: _____

Phone Number: _____

Student Email: _____

Parent/ Guardian Name: _____

Parent/ Guardian Phone: _____

Parent/ Guardian Email: _____

How many years have you played baseball?:

When was the last time you played baseball?

Do you currently play baseball now? If so, what team/ league.

Primary Position: _____

Secondary Position: _____

Please return to:

Pat Stafford

Head Baseball Coach

Patrick.Stafford@vbschools.com

Room 106