



# BC Amateur Baseball Association

#310 – 15225 104<sup>th</sup> Avenue, Surrey, BC V3R 6Y8

T:(604) 586-3310  
F:(604) 586-3313  
E:info1@baseball.bc.ca  
I: www.baseball.bc.ca

## **BASEBALL B.C. HIGH PERFORMANCE PODIUM PATHWAY** **Application for Canadian Development or Provincial Development Level 1** **Athlete Selection**

PLEASE TYPE OR PRINT CLEARLY

1. ATHLETE FULL NAME: \_\_\_\_\_
  - ADDRESS: \_\_\_\_\_
  - CITY: \_\_\_\_\_
  - POSTAL CODE: \_\_\_\_\_
  - E-MAIL: \_\_\_\_\_
  - PHONE NUMBERS (Including area code): \_\_\_\_\_
  
2. NATIONAL TEAM ? : \_\_\_\_\_  
*(Example: Women's National Team, Men's Junior National Team, Etc.)*
  - COACH NAME & E-MAIL: \_\_\_\_\_
  - ASSISTANT COACH NAME: \_\_\_\_\_
  
3. OR (IF NOT NATIONAL TEAM) COLLEGE/UNIVERSITY ? : \_\_\_\_\_
  - TYPE & LOCATION OF SCHOOL: \_\_\_\_\_
  - ATHLETIC DEPARTMENT: \_\_\_\_\_
  - CONTACT PERSON: \_\_\_\_\_
  - PHONE NUMBER: \_\_\_\_\_
  
4. BASEBALL BC PROGRAMMING: \_\_\_\_\_
  - YEAR(S) PARTICIPATED: \_\_\_\_\_

**I have read the details concerning the Canadian Sport Institute / PacificSport / Baseball BC Athlete & Coach Registration and I agree to all conditions outlined within, including my information above to be both true & correct.**

**ATHLETE NAME:** \_\_\_\_\_

**ATHLETE SIGNATURE:** \_\_\_\_\_ **DATE SIGNED:** \_\_\_\_\_

RETURN APPLICATION TO BASEBALL BC:  
#310 – 15225 104th Ave Surrey, BC V3R-6Y8 (604) 586-3310 / (604) 586-3311 (Fax)  
OR Scan &/or E-Mail scottm@baseball.bc.ca