

NEW MEXICO HIGH SCHOOL COACHES ASSOCIATION

SOFTBALL ALL-State Nomination Form

Classification: _____

District: _____

I N S T R U C T I O N S

This form is to be completed at the conclusion of the head coaches district athletes rating meeting.

This form **shall be signed** by the softball chairperson and head coaches of the district to attest that this was the determined and agreed nominations FOR All-State Softball

The districts athletes must be rated at and by the following position and in order of rating, as determined by the district coaches. **NOTE: An athlete may be rated at more than one position.**

Each district can nominate up to 3 athletes per position except for the OUTFIELD. A district can nominate up to 6 outfielders from within that district.

DISTRICTS SOFTBALL ATHLETES RATING

PITCHERS

<u>Name</u>	<u>School</u>	<u>Head Coach</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

CATCHERS

1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

FIRST BASE

1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

SECOND BASE

1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

THIRD BASE

- | | | |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

SHORT STOP

- | | | |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

OUTFIELDERS

- | | | |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |
| 6. _____ | _____ | _____ |

Submitted by District _____ Head Softball Coaches

District Chairman _____	_____
Signature	Date

District Coaches _____	_____
Signature	School

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please FAX to Buster
ASAP! 505 923-3114