# Ohio University-Chillicothe Fastpitch Softball
## Player Profile Sheet

- Full Name: _____
- Name you Prefer: _____
- Date of Birth: _____/_____/_____

- Home Address: _____ Phone # _____
  _____ Cell # _____
  _____ Other # _____
- Email: _____
- Parent/Guardian Name: _____
  Address: _____ Phone # _____
  _____ Cell # _____
  _____
- High School _____
- High School Stats/Awards _____
  _____
- Year of Graduation _____
- High School Coach _____ Phone #_____
- Primary/Best Position _____
- Right or Left Handed _____
- Summer Team / Other Organized Teams _____
  _____
- Previous College Experience _____
- Intended Academic Major _____

Send Completed Form to this address:

Ohio University-Chillicothe
Attn: Athletic Director
101 University Drive
Chillicothe, Ohio 45601