



ALL-STATE NOMINATION FORM
DUE: WEDNESDAY MAY 1st

Forms are to be emailed/mailed to your OBCA Region Representative and recieved by MAY 1st.

Head Coach MUST be a current member of OBCA in order to nominate a player for consideration.

All-State Selections:	Wednesday May 15	
All-State Selections Released	Thursday May 16	
All-State Practices:	Saturday June 1	David Allen Memorial Ballpark- Enid, OK
All-State Banquet:	Saturday Evening June 1	Enid, OK
All-State Games:	Sunday June 2	David Allen Memorial Ballpark- Enid,OK

Please circle the categories that applies to your nominee below:

EAST WEST REGION 1 2 3 4 5 6 7 8

LARGE 5A 6A MIDDLE 3A 4A SMALL B A 2A

NOMINEE INFO

Athlete's Name _____ High School _____

Address _____ City _____ Zip _____

Cell # _____ Email _____

Shirt Size _____ B/T _____ Height _____ Weight _____ College Commitment (If Applicable) _____

COACH INFO

Coach Name _____

Coach Cell# _____ Coach Email _____

Please complete the athlete profile information as accurately as possible. The OBCA must be able to reach the athlete at an address and phone number other than the school. This form must be completed for the athlete to be considered for All State honors. Due to the selection process and guidelines, please note that the top athletes may not always be chosen. In nominating this prospective All State athlete, I understand I assume the responsibilities as the coach in seeing that my nominee, if selected, will abide by the rules and regulations ascribed by the Oklahoma Baseball Coaches Association.

Coach Signature _____ Date _____

Coach and athlete information MUST be filled out for the All State nomination to be complete.



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NOMINEE INFO

Player Name _____ Primary Position _____ Secondary Position _____

Please list roles/achievements/awards for each year that is applicable to your nominee:

Freshman _____

Sophomore _____

Junior _____

Senior _____

Senior Season Statistics

OFFENSIVE STATS

AVG.	OBP%	AB	H	2B	3B	HR	RBI	R	HBP	BB	K	SB/SBA

PITCHING STATS

ERA	WIN	LOSS	SAVE	IP	H	R	ER	K	BB	HBP	BAA.

DEFENSIVE STATS

FLD %	TC	ASSISTS	PUTOUTS	ERRORS

CATCHING STATS

PASSED BALLS	SB ALLOWED	SB ATTEMPTS AGAINST

Form must be **RECIEVED** by your OBCA Region Representative **NO LATER THAN MAY 1**

Please email a photo of your nominee with this nomination form.