



PLAYER NOMINATION FORM

Coaches,

Please present this exciting opportunity to all eligible soccer players interested in participating in the Beasley College Soccer Identification Showcase. This event is only offered to sophomore, junior, or senior players who aspire to play at the college level.

All players interested must return the completed Nomination Form by October 18th.

Please return this back to The Plex before Oct. 18th, 2010 via email: jonl@plexsports.com
 Fax at 260-496-8116 or mail to 1807 East California Rd. Fort Wayne, IN 46825.

Name	Position	YR	Phone	E-MAIL	Address (include city and zip)

Player's Soccer Experience Please write a brief description of player's soccer experience and accomplishments
 (Suggested, not required – these descriptions will help in the selection process).

High School Soccer Accomplishments:

Club/Travel Soccer Accomplishments:

CLUB COACH Information:

NAME: _____ SCHOOL/CLUB: _____

CONTACT PHONE: _____ - _____ - _____

CONTACT E-MAIL: _____

HIGH SCHOOL COACH Information:

NAME: _____ SCHOOL/CLUB: _____

CONTACT PHONE: _____ - _____ - _____

CONTACT E-MAIL: _____