



Bosse Field 1701 N. Main St. Evansville, Indiana 47711

Evansville Otters Baseball Try-out

Indiana Baseball Academy is hosting an open try-out for the 2012 Evansville Otters baseball club of the Frontier League.

Try-out Location: Indiana Baseball Academy
9760 Mayflower Park Drive
Carmel, Indiana 46032

Date & Time: Sunday, February 26, 2012
Pitchers and Catchers: 11:00 am to 5:00 pm
Position Players: 12:00 pm to 5:00 pm

Registration: Must register prior to try-out. Registration form is located on next page. All registration forms can be emailed with credit card payment to ottersbaseballtryouts@yahoo.com or mailed with check payable to Indiana Baseball Academy:
Indiana Baseball Academy
9760 Mayflower Park Drive
Carmel, IN 46032

Cost: \$60.00 per player.

Who: Non-drafted college graduates from 2011
Free agents that were not 27 years old as of January 1, 2012

Kevin Cope
Director of Player Personnel
kcope@evansvilleotters.com

Andy McCauley
Field Manager

If you have any questions about registration, travel accommodations, hotels or the try-out, please contact us at ottersbaseballtryouts@yahoo.com



EVANSVILLE OTTERS PLAYER INFO SHEET 2012

Full Name: _____

Permanent Street Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

Date of Birth: _____ Age: _____ Height: _____ Wt: _____

Emergency Contact: _____ Phone: _____

Wear Contacts: Yes No Allergies: _____

Detail Any Past and Current Injuries: _____

College(s) and Graduation Date(s): _____

Major: _____

Years Played: _____ Eligibility Left: _____

Position(s): _____ Throw: Right Left Bat: Right Left Switch

Pro Experience: Yes No Drafted: Yes No Round: _____

Signed Pro Contract: Yes No

Pro Team(s) and Years Played: _____

Statistics: _____

Credit Card Payment: Visa/Mastercard# _____ Exp _____

Name as appears on CC _____

Payment by check: Please make all checks payable to Indiana Baseball Academy

I release and hold harmless the Evansville Otters Baseball team and camp representatives, the employees, the complex being used, its representatives and employees from any and all liability to me as a result of attending this activity.

Furthermore I am physically fit to participate in the daily program activities. I hereby authorize the staff of the Evansville Otters to act for me in an emergency.

Name _____ Date _____