

Meeting Date

St. Joseph High School Student Application

Please fax or scan this application and required documents
Fax: 403-341-4423 Email: stjoeinfo@rdcrs.ca
Ball Academy

Date:		Softball	Baseball
Student's Name:		Grade:	Gender:
School Currently Attending:		1	
Parent's Name:		Parent Contact Numbers: Home: Cell:	
Address:			
Email Address:			
Documents Required (For Non-Red Deer Catholic Students Only) (Please check and include a copy)			
☐ Most recent Report Card (History of courses and marks)			
□ Documentation of Legal Name, e.g.: Birth Certificate, Passport			
Player Demographics			
Current Team/Club:		Level: (A, AA, AAA)	
Previous Coach:		Number of years with Club:	
Preferred Positions: Pitcher Catcher Infield Outfield Throws:	, , , , , , , , , , , , , , , , , , ,		
☐ Left☐ Right			
Bats: Left Right			
Height:	Weight:		
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Administrator's Signature