



Ohio Travel Soccer League

All-Star Game Nomination Form

The All-Star Nomination is for 8th grade players who have been recognized by a coach of an OHTSL travel team as a top contributor to the team and deserving to participate in the OHTSL All Star game.

Community: _____

Age of Play: 2007/U14 2006/U15

Division of Play: D1 D2 D3 D4 D5 D6 9v9 East West

Gender: Girls Boys

Coach Name: _____ Phone #: _____

Coach Email: _____

Interested in Coaching All Star Game: Yes No

Player #1 Information:

Player Name: _____ Position: _____

Parent Name(s): _____

Parent Email(s): _____

Parent Phone #(s): _____

Alternate Player Information:

Player Name: _____ Position: _____

Parent Name(s): _____

Parent Email(s): _____

Parent Phone #(s): _____

Note: the alternate will only participate if player #1 is unavailable or OHTSL determines more players are needed.