



Please complete this form and email it to  
[CocoaBeachEvents@Gmail.com](mailto:CocoaBeachEvents@Gmail.com)  
 or fax to 1-855-386-3836  
 Questions? Call 855-386-3836 ext.1



**College Schedule Request Form Page 1**

**\* Games will NOT be scheduled until we receive your application, registration fee and deposit (\$1045.00)**

School Name: \_\_\_\_\_ State: \_\_\_\_\_

Coach Name: \_\_\_\_\_ Coach email: \_\_\_\_\_

Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Division \_\_\_\_\_ Conference \_\_\_\_\_ Last years record \_\_\_\_\_

**MUST be completed**

**Additional Games and practices can be scheduled on the back of this sheet.**

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ \*Preferred start Time \_\_\_\_\_  
 Is this your arrival day? YES NO Estimated arrival time? \_\_\_\_\_

**Tie Breaker rules after 7th inning**

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ \*Preferred start Time \_\_\_\_\_

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ \*Preferred start Time \_\_\_\_\_

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ \*Preferred start Time \_\_\_\_\_

**Are you requesting game(s) on your departure day? YES NO List Below**

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ Practice request \_\_\_\_\_  
 Estimated departure time? \_\_\_\_\_

1st choice Requested Day off: \_\_\_\_\_ 2nd choice Requested Day off: \_\_\_\_\_

**Additional Games and practices can be scheduled on the back of this sheet.**

***Teams are to provide 2 new ball per pitcher and 2 used balls per game.***

Will you play a team outside of your division? Yes No

Your requests will be accommodated to the best of our ability. **Game schedules are released 3 weeks prior to your arrival.**  
 The final schedule shall be a contract to play games which will benefit all teams in our program. Any outside games will be secondary to this schedule. **If you do not submit a schedule request prior to Jan.1st your games will be set at our discretion.**

Coach's signature \_\_\_\_\_ Date \_\_\_\_\_

**\*All information requested is important to the scheduling process. Incomplete forms result in incorrect schedules**

**\* Preferred Start times are taken into consideration but can not be guaranteed.**



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**College Schedule Request Form Page 2**

\* Games will **NOT** be scheduled until we receive your application, registration fee and deposit (\$1045.00)

School Name: \_\_\_\_\_ State: \_\_\_\_\_

Coach Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_

ADDITIONAL GAMES REQUEST

**Tie Breaker rules after 7th inning**

Division \_\_\_\_\_ Conference \_\_\_\_\_ Last years record \_\_\_\_\_  
**MUST be completed**

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ Preferred start Time \_\_\_\_\_

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ Preferred start Time \_\_\_\_\_

Date/Day \_\_\_\_\_ # of Games requested \_\_\_\_\_ Preferred start Time \_\_\_\_\_

PRACTICE REQUEST

**Practices are set for 2 hours from time on to time off the field**

Date/Day \_\_\_\_\_ Preferred start Time \_\_\_\_\_

Date/Day \_\_\_\_\_ Preferred start Time \_\_\_\_\_

**Game times will not be delayed for your team to warm up.**

**If you request a game on your departure date make sure to ask our housing director for a 2 room late check out.**

Your requests will be accommodated to the best of our ability. **Game schedules are released 3 weeks prior to your arrival.**

The final schedule shall be a contract to play games which will benefit all teams in our program. Any outside games will be secondary to this schedule. **If you do not submit a schedule request prior to Jan.1st your games will be set at our discretion.**

List Teams below that you will not play- BE SPECIFIC

<u>School Name</u>	<u>Region</u>	<u>Division</u>
1 _____	_____	_____
2 _____	_____	_____