



Please complete this form and email it to
CocoaBeachEvents@Gmail.com
 or fax to 1-855-386-3836
 Questions? Call 855-386-3836 ext.1
 High School Schedule Request Form Page 1



School Name: _____ State: _____

Coach Name: _____ Coach email: _____

Work phone: _____ Cell phone: _____ State Athletic affiliation: _____

Circle your sport and team *Each team requesting games needs to submit their own schedule request form.*
Baseball Softball Varsity JV Freshmen

School student enrollment #: _____ Last years record: _____

Circle your school type: Public Private Academy Religious Charter Preparatory

What state athletic association are you sanctioned with if any? _____
Is this association affiliated with the National Federation of High schools? YES NO

Please rate your team correct evaluation helps us match you with similar teams when available.

1 2 3 4 5 6 7 8 9 10
 No Seniors Losing record 50/50 record Regional Qualifier State Champions

You will be scheduled vs teams +/- 3 ratings from your team. School size is not a true indicator of teams competitive ability.

Are you willing to travel to an outside facility for games? YES NO
 Will your season begin before your arrival? YES NO

Circle all types of contests your team is able to play.
Official Games Unofficial Games Scrimmages Friendly Games

*Note: any contest besides Official games can be played as mutually agreed upon by coaches and umpires at pregame meeting.

Write notes to Scheduler below

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

Best time and date to contact you? _____ *Phone number?* _____
 Coach's signature _____ Circle Work or Cell
 Date _____

Cocoa Beach/Space Coast High School Schedule Request Form Page 2

School name _____ Coach name _____ Cell # _____

We are staying at this hotel: _____

Games scheduled on arrival and departure days are not advised as teams travel is often unpredictable

Arrival Date _____ Arrival Time _____ Departure Date _____ Departure Time _____
Hotel check in is 4pm Hotel check out is 11am

1st choice Requested Day off: _____ 2nd choice Requested Day off: _____

Request your games and practices below

Tie Breaker rules after 7th inning

Date/Day _____ # of Games requested _____ Practice request _____

Is this your arrival day? YES NO Estimated arrival time? _____

Practice field space is limited please request only the time you will use.

Practices must be reserved and are set for 2 hours from time on to time off the field

Date/Day _____ # of Games requested _____ Practice request _____

Batting cages are available before games without reservations.

Date/Day _____ # of Games requested _____ Practice request _____

Date/Day _____ # of Games requested _____ Practice request _____

Date/Day _____ # of Games requested _____ Practice request _____

Date/Day _____ # of Games requested _____ Practice request _____

Date/Day _____ # of Games requested _____ Practice request _____

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

Date/Day _____ # of Games requested _____ Practice request _____

Estimated departure time? _____

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

If you do not submit a schedule request prior to Jan.1st your games will be set at our discretion.

Game schedules are released 3 weeks prior to your arrival.

Teams must provide 2 new and 2 good used balls per game. Additional used balls as needed.



Game times will not be delayed for your team to warm up.
All games are played according to National Federation of High School Rules



Your requests will be accommodated to the best of our ability.

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

Coach's signature _____

Date _____