



WINSTON BASEBALL
League Performance Evaluation For Fall 2009 Season

LEAGUE (choose one): Pre-T Shetland Pinto
Mustang Bronco Pony

Team Name: \_\_\_\_\_

PARENTS NAME & PHONE NUMBER (not required)
\_\_\_\_\_ ( ) \_\_\_\_\_

Table with 5 columns: WAY BELOW OUR EXPECTATIONS (1), BELOW OUR EXPECTATIONS (2), MET OUR EXPECTATIONS (3), EXCEEDED OUR EXPECTATIONS (4), WAY BEYOND OUR EXPECTATIONS (5)

PLEASE PLACE THE NUMBER IN EACH BLANK SPACE THAT BEST REPRESENTS YOUR FEELINGS ABOUT THE FALL 2009 SEASON.

- 1. \_\_\_\_\_ The team's objectives for the season were clearly defined by the coach.
2. \_\_\_\_\_ The coaches communicated clearly to players and parents their expectations for players and parents.
3. \_\_\_\_\_ The coaches were effective teachers of baseball skills.
4. \_\_\_\_\_ The coach's emphasis on winning was balanced with concern for each player.
5. \_\_\_\_\_ The coach's actions were consistent with the objectives outlined for the season.
6. \_\_\_\_\_ The team's practice were organized, kept players active, focused on fundamentals and were fun.
7. \_\_\_\_\_ My child received the league-mandated minimum playing time every game. (Does not apply to Shetland).
8. \_\_\_\_\_ My child improved his hitting, fielding and throwing skills this season.
9. \_\_\_\_\_ My child learned sportsmanship, teamwork, and to challenge himself to improve this season.
10. \_\_\_\_\_ My child found this season's baseball experience fun.

Please provide any further comments and/or suggestions (on the next page) to improve the baseball experience at Winston Park. Please return completed forms to the concession stand, send via email from the second page, or mail them to Winston Baseball, P. O. Box 552, Winston, GA 30187.

## Additional Comments