

# Murray High Baseball

## Senior Day Questionnaire

Return this form to Coach Wilson by Senior Day (Wednesday, May 8)

Player Name: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

\_\_\_\_\_ started playing baseball at age \_\_\_\_\_ and has  
*(Player Name)*

played for Murray High for \_\_\_\_\_ years as a \_\_\_\_\_, \_\_\_\_\_,  
*(Position)* *(Position)*

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
*(Position)* *(Position)* *(Position)* *(Position)*

Favorite baseball memory at while at Murray:

---

---

Favorite all-time memory of playing baseball growing up:

---

---

Thank You or any acknowledgments of supportive people along the way:

---

---

---

---

Plans after high school:

---

Anything more?

---

---