



## Pre-Season Questionnaire For Parents

(Parents of four-year olds to teens)



1. Why did you register your child to participate in baseball?  
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\_\_\_\_\_  
\_\_\_\_\_
2. What are your expectations of the program leaders, and specifically of the coaches?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. In your opinion, what goals should be set for the team by the team leaders?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Identify values that you think should be promoted by the program.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Important facts about your child that team leaders should know about (e.g. allergies, health issues, previous injuries).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\* *Please return the questionnaire at least one week before the parents' meeting.*

\_\_\_\_\_  
Participant's Name                      Parent/Guardian's Name

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (dd/mm/yyyy)