

2011 Player of the Year

NYSHSFCA Nomination Form

PLEASE PRINT CLEARLY!

Name of Section Rep: _____

Section _____

Players Name _____ Grade _____

Positions: Offense _____ Defense: _____ Special Teams _____

Statistics:

Home Address _____

City / Zip _____

Home phone _____

E-mail _____

Class (Circle One): AA A B C D

Head Coach _____

School _____

Home phone _____

E-mail _____

Must be Returned before December 20 2011 to:

Don Santini NYSHSFCA

90 Potter Place Fairport, N.Y. 14450

FAX: 585-421-8031

E-mail: dsantini@frontiernet.net

Home Phone: (585) 223-1274