



NEW YORK STATE
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

SENIOR ALL-STAR CONTEST
Application

PLEASE NOTE: PARTICIPANTS MAY ONLY BE THOSE SENIORS WHO ARE NO LONGER INVOLVED IN SECTIONALS, REGIONALS OR STATE COMPETITION. ATHLETES PARTICIPATING IN THIS CONTEST ARE NO LONGER ELIGIBLE IN THIS SPORT.

Sport or Activity _____

1. Name of Contest _____ Date _____

2. Site of Contest _____

3. Co-sponsoring school, league or section _____
(for events sponsored with any outside organization, college or university)

4. School personnel responsible for contest supervision: Name _____
Address _____ Zip _____ Phone _____

5. School personnel responsible for screening and selection of contestants: _____

6. School personnel responsible for screening and selection of coaches: _____

7. Net profit to be donated to the following charitable or educational programs: _____

8. Contestants will be insured by: _____ Own School
Other(list) _____

Liability insurance supplied by sponsor: _____ Section _____ Other (List)* _____

***Attach certificate of insurance**

9. Signature of host Athletic Administrator (if applicable): _____

10. Uniforms are to be supplied by: _____

11. Officials' organization to assign contest officials: _____

12. Within two weeks of completion of the contest, all of the following must be mailed to
Secretary/Treasurer of the Section sanctioning the contest:

- | | |
|------------------------------------|---------------------------|
| 1. Complete roster of participants | 3. Injury report |
| 2. Complete financial report | 4. Complete awards report |

Completed application presented and approved by Section _____

Date _____ Section Executive Director _____

NOTE: Contests approved by the Section must be mailed for recording to:

Robert Zayas, Executive Director
New York State Public High School Athletic Association, Inc.
8 Airport Park Boulevard
Latham, NY 12110

NYSPHSAA, Inc. USE ONLY:

Application complete _____ Date _____

Application returned
as incomplete _____

Executive Director



NEW YORK STATE
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION

SENIOR ALL-STAR CONTEST

CRITERIA

Application for approval of a Senior All-Star Contest shall be submitted to the New York State Public High School Athletic Association after approval by the Section Executive Director. Approval will be granted if all the required forms are properly completed and all of the following provisions satisfied:

1. The contestants shall be seniors who have completed their secondary school eligibility in that sport. No contestant shall still be involved in Sectional, Regional or State competition.
2. Only school personnel shall be responsible for the screening and selection of contestants for participation in the contest.
3. Only school personnel shall be responsible for the screening and selection of coaches for conducting the contest.
4. A contestant may participate in any approved Senior All-Star Contest in the same sport during the school year.
5. All participants and personnel involved in an approved Senior All-Star Contest must sign the NYSPHSAA Letter of Intent.
6. All contestants must be bona-fide students from schools who are members of the New York State Public High School Athletic Association and such contests must be conducted in New York State.
7. The contest shall have an established charitable or educational purpose; the financial arrangements of the contest shall reflect an accomplishment of that purpose, and all net receipts from the contest shall be utilized for such purpose. Net receipts shall be gross receipts less expenses directly connected with the administration and conduct of the contest. Gross receipts shall include all revenues derived from the contest. Financial records must be clearly specified in the application for approval according to the terms of the agreement and meet the criteria as approved by the New York State Federation of Secondary School Athletic Associations.
8. Applications must meet guidelines as to safety, number of practices prior to contest, insurance, Commissioner's Regulations, awards and other requirements determined by the New York State Federation of Secondary School Athletic Associations and the individual association.
9. All contests must be conducted within the approved sport season.
10. Commercial sponsors would be discouraged and should not be necessary for conducting a viable Senior All-Star Contest.



NEW YORK STATE
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION

SENIOR ALL-STAR CONTEST

Letter of Intent

I _____ will participate in the following contest:

Name of Contest _____

Sport to be Contested _____

Date of Contest _____

Site of Contest _____

I fully understand the following rules, regulations, guidelines and laws governing my participation in such a contest as printed in the criteria on page 1 of this letter. I also understand that:

1. I am permitted to play in any approved Senior All-Star Contest in this sport.
2. I am no longer eligible in this sport.
3. I am no longer participating in Sectionals, Regionals or State competition in this sport.
4. I have not played in any non-approved Senior All-Star Contest in the last year.

Failure to meet the criteria above will result in the loss of your high school eligibility in this sport.

Signed _____
(athlete)

Signed _____
(parent or legal guardian)

Signed _____
(witness)

(school personnel responsible for screening and selection of contestants)

Date _____

Attach to roster of game participants and mail with post game report to Secretary/Treasurer of the section in which contest takes place.

SENIOR ALL-STAR CONTEST

Roster

Name of Contest _____ Date _____

Sport Contested _____ Site _____

School personnel responsible for contest supervision:

Name(s) _____

Address _____ Phone _____

CONTESTANTS (print)

| | <u>Name</u> | <u>School</u> | <u>Grade 12 Graduate</u> | <u>Ht.</u> | <u>Wt.</u> | <u>Address</u> | <u>Phone</u> |
|-----|-------------|---------------|------------------------------|------------|------------|----------------|--------------|
| 1. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 7. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 8. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 9. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 10. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 11. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 12. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 13. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 14. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 15. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 16. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 17. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 18. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 19. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 20. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |

MUST BE RETURNED WITHIN TWO WEEKS AFTER CONTEST TO SECRETARY/ TREASURER OF YOUR SECTION.

(Additional listing space on back)

| <u>Name</u> | <u>School</u> | <u>Grade 12 Graduate</u> | <u>Ht.</u> | <u>Wt.</u> | <u>Address</u> | <u>Phone</u> |
|-------------|---------------|------------------------------|------------|------------|----------------|--------------|
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| 48. | | | | | | |

**SENIOR ALL-STAR CONTEST
FINANCIAL REPORT**

Name of Contest _____ Date _____

Sport Contested _____ Site _____

RECEIPTS:

Advance Sales \$ _____

Gate Receipts \$ _____

Program Sales \$ _____

Advertisements \$ _____

Entry Fees \$ _____

Radio/Television \$ _____

Other: \$ _____

\$ _____

TOTAL RECEIPTS \$ _____

EXPENDITURES

Chairman's Expense \$ _____

Ass't. Chairman's Expense \$ _____

Officials \$ _____

Programs \$ _____

Program Sellers \$ _____

Printing \$ _____

Tickets (tellers/sellers) \$ _____

Security \$ _____

Custodial \$ _____

Site Rental \$ _____

Concessions \$ _____

Sound System \$ _____

Game Management (scorers etc.) \$ _____

Other: \$ _____

\$ _____

TOTAL EXPENDITURES \$ _____

Signature _____

TOTAL RECEIPTS \$ _____

Date _____

TOTAL EXPENDITURES \$ _____

Submit this report to your Section Secretary/Treasurer within two weeks after completion of the contest.