

In order to maintain complete student-athlete activities yearly report, please fill in the blanks and return the form to the Athletic Office.

Name of Sport: _____		Year: _____		Fall <input type="checkbox"/>	Spring <input type="checkbox"/>
No. of Individuals Participating: _____		League Record: W _____ L _____ T _____			
No. of Games or Meets: _____		Season Record: W _____ L _____ T _____			
Final Standing in Conference: _____		Name of Coach: _____			

Name of Lettermen/women. (Alphabetize) Include name of award individuals earned (i.e.: MVP, Captain, All Conference, etc) in detail.

Date of Your Sports Banquet: \_\_\_\_\_ Location: \_\_\_\_\_

Certificate of Participation			Plaque	All Conference Certificate
No.	Last Name	First Name	“What Does Plaque Say?”	(1 <sup>st</sup> Team, 2 <sup>nd</sup> Team, etc)
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