

WASHINGTON STATE COACHES ASSOCIATION

Senior All-State Game Grant Request

Name of Organization _____ Date of application _____

Game Coordinator _____

Address: _____ Phone: _____

Email address _____

Date/Time of contest _____

Site of contest _____

Site Coordinator _____

(if different than game coordinator)

Briefly outline the selection process. (must be state-wide)

Brief description of All-State format:

All-State Check-list:

- ___ 1. All game coaches must be current WSCA members
- ___ 2. Approved game insurance. Contact J Parrish for insurance application six (6) weeks prior to game.
- ___ 3. All work must be done through your ISA rep. for WSCA.
- ___ 4. All-State event must be held in WA state and grant may not be used for travelling group (interstate contest)
- ___ 5. All participants must be senior and currently eligible and on track to graduate/graduated.

Please complete and return this form one month prior to game.

Grant will be reimbursed as per current executive board policy for game enhancement and will be sent upon receipt of completed Game Expense Report following contest.

Send forms to: Pat Fitterer
1115 S 45th Ave
Yakima, WA 98908
509-966-3516

*email: coachfitterer@hotmail.com

or send form to: Bill (Alex) Alexander
201 C Street SE
Quincy, WA 98848
509-781-1152

*email: aalexand@qsd.wednet.edu

*email would be preferred

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|-------------------|--------------------------|---------------|------------|
| WSCA Office Only: | Date received: _____ | approve _____ | deny _____ |
| | If denied, reason: _____ | | |
| Check # _____ | Date mailed: _____ | | |