

SOUTHWEST OHIO FOOTBALL COACHES ASSOCIATION

2009-2010 S.W.O.F.C.A./Ron Woyan East-West All Star Game Nomination Form

Coaches Rating _____(rank your players in order of picks for the game)

Player Name:, _____ **School:** _____

Address: _____

City: _____ **State** _____ **Zip** _____

Phone: _____ **home** _____ **cell** _____

Position(s) _____ **(OFF)** _____ **(DEF)** _____ **(ST)** _____

HT _____ **WT** _____ **SPEED (40)** _____

Jersey Size _____ **Jersey #** _____ **(1st choice)** _____ **(2nd choice)** _____

Honors/Awards _____

Comments/Recommendation: _____

I, hereby commit myself to play in the SWOFCA / Ron Woyan East-West All Star Game (if selected). I will attend al/ related practices and meetings. I have been informed by my head coach of the rules & regulations involved in the game as set forth by SWOFCA and pledge to comply. I will represent myself, my family & school with class & dignity.

Nominee/Player Signature: _____

Parent/Guardian Signature:, _____

Head Coach's Signature: _____