

	<h2 style="text-align: center; text-decoration: underline;">CIF/CENTRAL COAST SECTION</h2>
	<p style="text-align: center;">6830 Via Del Oro, Suite 103 San Jose CA 95119 408-224-2994 408-224-0476 (fax) www.cifccs.org</p>

CCS MEMBERSHIP APPLICATION FORM

Please submit this completed application along with the following to the CCS Office at the address below.

- A letter of application as outlined in the CCS Membership Policy ([Format attached](#))
- A Resolution from the governing authority as outlined in the CCS membership Policy ([Format attached](#))
- A copy of the required letter from any league you wish to join
- A copy of your school's mission statement and code of conduct
- A check made out to CCS for the amount of the Application Fee and Administrative Service Fee.

FULL NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

CITY, STATE, ZIP: _____

TELEPHONE # _____ FAX # _____

WEB ADDRESS: www. _____

NAME OF CHIEF ADMINISTRATIVE OFFICER _____

TITLE OF CHIEF ADMINISTRATIVE OFFICER _____

E-MAIL OF CHIEF ADMINISTRATIVE OFFICER: _____

NAME OF ATHLETIC ADMINISTRATOR IN CHARGE OF ATHLETICS _____

TITLE OF ATHLETIC ADMINISTRATOR IN CHARGE OF ATHLETICS _____

E-MAIL OF ATHLETIC ADMINISTRATOR IN CHARGE OF ATHLETICS _____

CURRENT ENROLLMENT: _____

THREE YEAR PROJECTED ENROLLMENT: 1 _____ 2 _____ 3 _____

1. Is your school registered with the California State Department of Education?
 YES NO
2. What year was your school first registered with the California State Department of Education? _____

3. We are applying for membership as a(n):

a) ASSOCIATE MEMBER

b) FULL MEMBER IN THE _____ LEAGUE.

1) We have contacted this league and have attached a letter from the league stating their position on our membership: YES NO

4. We are applying for membership commencing in the _____ of the _____ school year. (fall, winter, spring) (year)

5. What sports teams are you currently fielding?

NONE (skip to #6) OR LISTED BELOW

<u>Sport</u>	<u>Male</u>	<u>Female</u>	<u>Levels</u> <u>(Freshman/Fr-Soph/JV/Varsity)</u>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

Attach separate sheet if necessary

6. What sports teams are you planning on fielding upon joining the CCS?

SAME AS ABOVE (skip to #7) OR LISTED BELOW

<u>Sport</u>	<u>Male</u>	<u>Female</u>	<u>Levels</u> (Freshman/ Frosh-Soph/ JV/ Varsity) (please include school year to plan to offer this sport-eg tennis 2011-2012)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

Attach separate sheet if necessary

7. If you are a coed school and your balance of male and female sport offerings are not equal, please explain why in an attached statement.

STATEMENT OF INTENT:

By my signature below and the attached Letter of Application and Board Resolution, I attest:

1. that I have reviewed the rules and regulations and policies of the CCS and CIF and the league (if applicable); and
2. that our school intends to follow all CIF, CCS, and league (if applicable) rules and regulations and
3. that our school will administer our athletic programs within the bounds of the Membership, Mission statement and Sportsmanship policies of the CIF and CCS and the league (if applicable)
4. that I have read this membership policy and understand and accept the terms therein..

Signature of Chief Administrative Officer

Date

PLEASE RETURN COMPLETED APPLICATION AND OTHER REQUIRED
APPLICATION MATERIALS TO CCS

6830 Via Del Oro, Suite 103, San Jose CA 95119 FAX 408-224-0476
