

**CCS GIRLS TEAM GOLF
SEASON SUMMARY SHEET**

(required for At-Large applicants only)

California Interscholastic Federation
Central Coast Section

Governance of H.S. Athletic Programs
from San Francisco to King City

SCHOOL NAME _____ **LEAGUE:** _____

*All those wishing to be considered for At-Large selection **MUST** complete **ALL** portions (1-5) of the form below and make sure **BOTH** pages are received in the CCS Office **BEFORE 7:00 PM on OCTOBER 28, 2011**, in order to be entered or considered for entry into the CCS Girls Team Golf Championships. If your form is not in by this deadline, or is incomplete, your team will not be considered for At-Large selection to the CCS Play-offs.*

1. _____ High School, of the _____ League, is submitting this form for the CCS Girls Team Golf Championships as our average-team-score for four (4) players is equal to, or better than, 78% of the slope at our League Tournament. Therefore, we are eligible to request consideration for an At-Large berth into this year's CCS Girls Team Golf Championships.

LEAGUE TOURNEY HELD AT: _____

TEES USED: _____ **SLOPE OF COURSE:** _____

Our Team Score _____ = _____ **% of slope listed above**

2. REQUIRED INFORMATION*

*COACH _____
(please print first and last name)

*Home Phone# (_____) _____

*OVERALL SEASON RECORD _____ - _____ - _____

*Work Phone# (_____) _____

*LEAGUE RECORD _____ - _____ - _____

Cell Phone # (_____) _____

*LEAGUE FINISH _____

E-MAIL: _____

*Co Champ? _____ Tri Champ? _____

3. COACH STATEMENT (*signature required)

By my signature below, I attest that the following information about our school team is accurate to the best of my knowledge. I further understand that if it is discovered that anyone associated with our school knowingly provided false information herein, serious and negative consequences will affect our school's athletic program and our participation in the CCS Play-offs, per CIF and CCS Fraud Bylaws.

*Head Coach Signature _____ Date _____

League Representatives **MUST** make sure **both pages** of this form are received in the CCS Office **PRIOR TO THE BEGINNING OF THE CCS GIRLS TEAM GOLF AT-LARGE SELECTION MEETING**

CCS, 6830 Via Del Oro, Suite 103, San Jose, CA 95119

E-mail Howard: hjensen@cifccs.org or FAX: 408-224-0476

(If e-mailed, you must also fax or deliver a completed, signed copy before the beginning of the meeting.)

4. SCHOOL NAME _____ LEAGUE _____

Listed below are the results of all of our team's regular-season (pre-season & League) scheduled contests. (End-of-season League Tournaments are NOT to be included.)

➤ List ALL non-tournament matches below in chronological order.

<u>DATE</u>	<u>OPPONENT</u>	<u>COURSE</u>	<u>TEAM SCORES</u>	<u>DATE</u>	<u>OPPONENT</u>	<u>COURSE</u>	<u>TEAM SCORES</u>
1. _____	_____	_____	____/____	8. _____	_____	_____	____/____
2. _____	_____	_____	____/____	9. _____	_____	_____	____/____
3. _____	_____	_____	____/____	10. _____	_____	_____	____/____
4. _____	_____	_____	____/____	11. _____	_____	_____	____/____
5. _____	_____	_____	____/____	12. _____	_____	_____	____/____
6. _____	_____	_____	____/____	13. _____	_____	_____	____/____
7. _____	_____	_____	____/____	14. _____	_____	_____	____/____

LISTED BELOW ARE THE RESULTS OF ALL TOURNAMENTS PLAYED THIS SEASON
(Do not include League Finals)

<u>DATE</u>	<u>TOURNAMENT</u>	<u>COURSE</u>	<u>FINISH/TEAM SCORE</u>	<u>DATE</u>	<u>TOURNAMENT</u>	<u>COURSE</u>	<u>FINISH/TEAM SCORE</u>
1. _____	_____	_____	____/____	4. _____	_____	_____	____/____
2. _____	_____	_____	____/____	5. _____	_____	_____	____/____
3. _____	_____	_____	____/____	6. _____	_____	_____	____/____

5. TEAM INFORMATION

Indicate below with (*) any golfer who also qualified for the CCS Girls Individual Tourney

NAMES OF TEAM'S 6 GOLFERS
(first and last — please print neatly)

Golfer's average "first-9-holes" score for all League matches

1. ()	_____	_____
2. ()	_____	_____
3. ()	_____	_____
4. ()	_____	_____
5. ()	_____	_____
6. ()	_____	_____

PLEASE SUBMIT COMPLETED FORM TO CCS BEFORE **BEGINNING OF SEEDING MEETING**

CCS FAX: 408-224-0476 or e-mail Howard: hjensen@cifccs.org (both pages must be submitted)

If you e-mail this form, please also fax or deliver a completed, signed copy before the meeting.