

DEADLINE: Return to CHSAA office no later than the beginning of the competitive season for the sport season in question

Return to: CHSAA  
Bert Borgmann, Assistant Commissioner  
14855 E. Second Avenue  
Aurora, CO 80011

Date: \_\_\_\_\_

**APPLICATION FOR CONDUCTING A TEAM COOPERATIVE ATHLETIC PROGRAM**

**(Competing as a team and scoring points for one team in any CHSAA sport)**

**(Each school participating as a cooperative team must pay 50% of the full participation fee.)**

See By-law 1791.1 - Cooperative Programs

(To Be **Jointly** Completed By Participating Schools)

1. SPORT \_\_\_\_\_ (One Sport per Application Form)

2. SCHOOLS MAKING APPLICATION

A. \_\_\_\_\_ AND B. \_\_\_\_\_

\_\_\_\_\_ Supt. \_\_\_\_\_

\_\_\_\_\_ Prin. \_\_\_\_\_

\_\_\_\_\_ A.D. \_\_\_\_\_

C. \_\_\_\_\_ AND D. \_\_\_\_\_

\_\_\_\_\_ Supt. \_\_\_\_\_

\_\_\_\_\_ Prin. \_\_\_\_\_

\_\_\_\_\_ A.D. \_\_\_\_\_

3. ADMINISTRATOR OF RECORD (The CHSAA will contact one person, listed below, seeking information about the program): when

Name \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

\_\_\_\_\_

4. NAME OF COOPERATIVE TEAM \_\_\_\_\_

School (s)

Mascot, if applicable

5. DISTANCE BETWEEN SCHOOLS \_\_\_\_\_ miles

6. COACHING STAFF

Head Coach \_\_\_\_\_ School \_\_\_\_\_

Assistant \_\_\_\_\_ School \_\_\_\_\_

Assistant \_\_\_\_\_ School \_\_\_\_\_

7. SITE OF GAMES \_\_\_\_\_

8. SCHOOL ENROLLMENTS -- Fall count, by grade, which determined school's current classification:

School A \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_

9. STUDENT PARTICIPATION IN THE SPORT FOR WHICH APPLICATION IS MADE -- Fall count, by grade, which determined school's current classification. (Write "n/a" after total if sport was not sponsored by the school.)

School A \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_

10. ADDITIONAL AGREEMENTS BETWEEN SCHOOLS

Please attach a written agreement between the participating schools which includes the following:

- a. Conditions prompting application for cooperative agreement and goals of co-op
- b. Administrative responsibility
- c. Liability and insurance
- d. Uniforms (colors, cost, identifying names, etc.)
- e. Financial arrangements
- f. Operating procedures
- g. Facilities
- h. Practice sites and schedules
- i. Staffing
- j. Evaluation of staff
- k. Supervision at contests, home and away
- l. Transportation
- m. Contracting game officials
- n. Cheerleaders/pep squads
- o. CHSAA eligibility reports
- p. Periodic in-school eligibility checks
- q. Procedures for awarding athletic letters

11. Indicate the date and location of the school board meeting at which the filing of this application was approved.  
NOTE: If all the cooperating schools are from the same school district, school board approval is not required.

School A \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_  
School B \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_  
School C \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_  
School D \_\_\_\_\_ School B \_\_\_\_\_ School C \_\_\_\_\_ School D \_\_\_\_\_

**As part of this application, please include, on school letterhead, the school board resolution approving participation in this cooperative program.**

12. AUTHORIZATION FOR THE FILING OF THIS APPLICATION

The undersigned have jointly filed this application and verify the information contained herein.

Date of Application \_\_\_\_\_

School A \_\_\_\_\_ School B \_\_\_\_\_

\_\_\_\_\_ Bd. Pres. \_\_\_\_\_

\_\_\_\_\_ Supt. \_\_\_\_\_

\_\_\_\_\_ Prin. \_\_\_\_\_

School C \_\_\_\_\_ School D \_\_\_\_\_

\_\_\_\_\_ Bd. Pres. \_\_\_\_\_

\_\_\_\_\_ Supt. \_\_\_\_\_

\_\_\_\_\_ Prin. \_\_\_\_\_

Official Action of the CHSAA

The above request for cooperative sponsorship has been reviewed by the CHSAA Assistant Commissioner with the following action taken:

APPROVED DENIED DATE \_\_\_\_\_

Signed \_\_\_\_\_, CHSAA Assistant Commissioner