



EAST-WEST ALL-STAR PLAYER NOMINATION

(To be made only by HEAD COACHES who are NCCA Members)



Circle one:

EAST

(Districts 1, 2, 3, 4)

WEST

(Districts 5, 6, 7, 8)

SPORT (Circle one):

Football

Men's Basketball

Women's Basketball

Men's Soccer

Women's Soccer

Player's Name _____ Player's Phone # _____

Player's Position _____ Number _____ Height _____ Weight _____ Age (must be HS senior) _____

School _____ School Phone _____

School Address _____

Classification (circle one): 1A 2A 3A 4A

I attest that this player is an All-Star caliber athlete and possesses good character. I will follow all NCCA guidelines in informing, preparing, equipping, and transporting my player. (Refer to page 7 in this Directory.)

Head Coach (Signature) _____

Head Coach (Print Name) _____

Head Coach Address _____

Head Coach Home Phone _____ Cell # _____

Awards, Statistics, Honors, etc., may be listed on the back or separately.