APPLICATION FOR NYSPHSAA FRIEND and NEIGHBOR STATUS

1. Applying school must complete all information in Part I.
2. **APPLYING SCHOOL SHOULD FORWARD THIS APPLICATION TO THEIR SECTION OFFICE FOR APPROVAL.**
3. Section Athletic Council approves application in Part II.
4. Section Athletic Council forwards approved application to NYSPHSAA Executive Director for NYSPHSAA Central/Executive Committee approval at their next scheduled meeting.

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**PART I School Information:** to be completed by the applying school, then forwarded to the Section Athletic Council for approval.

- **Name of School**
- **Athletic Director**
- **Address**
- **City/State/Zip**
- **Phone**
- **E Mail Address**
- **SED Code** (12 digit #)

*Signature of Chief School Officer represents an agreement that the applying school will follow all NYS Education Department regulations and New York State Public High School Athletic Association bylaws, eligibility standards and sports standards when participating with NYSPHSAA schools.*

*Enrollment:*

<table>
<thead>
<tr>
<th>Grade 7</th>
<th>Grade 8</th>
<th>Grade 9</th>
<th>Grade 10</th>
<th>Grade 11</th>
<th>Grade 12</th>
<th>Sec. UNG</th>
</tr>
</thead>
</table>

*Please use figures from the October BEDS of the current school year.*

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**PART II Section Approval:** TO BE COMPLETED BY SECTION ATHLETIC COUNCIL

**TO:** NYSPHSAA EXECUTIVE DIRECTOR

The Section _______ Athletic Council has approved on________ (date)

(1-11) _____________________________________________

(name of applying school)

We request approval for this school to become a Friend and Neighbor of the NYSPHSAA, Inc.

__________________________________________

Section President

__________________________________________

Section Secretary/Director

8/17