



BASKETBALL _check if for boys and girls combined_____ Chapter:_____

Date_____

Name, Cell & Position of Person Completing Form: _____

*****EACH RECOMMENDED CREW SHOULD REFLECT THE DIVERSITY OF YOUR CHAPTER.**

DEADLINE DECEMBER 1, 2011

Please list your top three person crews in rank order. BOYS Name, {email address, cell phone number}	Years Experience	State Tourn. List years	Test Scores (optional)			College Schedule (√)
			Part I	Mech	Part II	
R:						
U1:						
U2:						

R:						
U1:						
U2:						

R:						
U1:						
U2:						

Please list your top three person crews in rank order. GIRLS Name, {email address, cell phone number}	Years Experience	State Tourn. List years	Test Scores (optional)			College Schedule (√)
			Part I	Mech	Part II	
R:						
U1:						
U2:						

R:						
U1:						
U2:						

R:						
U1:						
U2:						