

Application for Cooperative Team Sponsorship

Deadlines for submission of applications:

Aug. 1=Fall sports/activities; Oct. 1=Winter sports/activities; Feb. 1=Spring sports/activities

A separate application MUST be completed and submitted for each boys' athletic team, each girls' athletic team, and each activity.

For criteria under which cooperative teams may be formed, refer to Section 2.030 of the By-laws and Section 26 of the Administrative Procedures, Guidelines and Policies Section in the IHSA Handbook with Illustrations.

This application is for cooperative sponsor		_	7 and 2017-2018.				
Girls	Swim e	DIVE		Unaf	filinte	°0	
(Specify Gender of Team)	(Sport/Activity)	8.1	•	perative Team	,	,	
2. NAME OF SCHOOLS	CITY		L CONFERENCE EACH SCHOOL			ENROLLMENT	
Byron	Byron		BIG	North	Kn	481	
Ashton- FRANKlin			NUI	C		161	
Meridian	Stillman V	0/1/011	BIA	North	een	587	
Oregon	Oregon		1316	Nort	Lern	443	
Forrestville Valle			NU	10		261	
Polo	Polo		Nul	C		196	
Pecatonica	Pecatonic	a	NU	'C		256	
Winnebago	Winneba	.90	B16	Northe	RN	438	
DIXON	Dixon		BIA	North	ekn	803	
3. The following rationale underlies our desir		ip:					
· · · · · · · · · · · · · · · · · · ·	have an inte		n expa	nolina	the		
extracuricular	, ,,		red to	Hair	Colerah	m + c	
- SATISFACTION OF T	Spr of familia		~ <i>U</i>	1.000	رعوصور	, , , , , , , , , , , , , , , , , , , 	
cooperative agreement is: SCHCOL Byron #226 AFC #275 Meridian #223			O, OF STUDENTS (ARTICIPATED IN 20		NO, OF STUDENTS EXPECTED IN CO-OP IN 2016-2017 5 7		
Orogon # 220			<u></u>		<u> </u>		
_Forrestville Valley #221			2		2		
Polo # 222			2			2	
Pecatonica #32	-1		<u> </u>			<u>o</u>	
Winnebago # 323		· · · ·	<u> </u>			3	
Dixon #17	70	· -	6			<u> </u>	
5. Host school: Byror		Contact	person:	Jim	KAnn		
Team school name:B	yron	Team n	lckname:	719	ers		
Practices to be held at:	Byron Hs	Home o	ontests to be held	at: Bu	ron }	/ S	
6. Attach letters from the presidents of A	ALL conferences of which each s					, certifying that thi	
cooperative team has been approved by to 7. Attach a letter from the president of the co		ve team will be	a member in 201	6-2017, certifyi	ng that this co	operative team ha	

7. Attach a letter from the president of the conference of which this cooperative team will be a member in 2016-2017, certifying that this cooperative team has been approved by the conference. If this cooperative team will not participate in a conference, attach letters approving the cooperative team from seven (7) schools on its 2016-2017 schedule.

8. Attach a signed copy of the intergovernmental agreement of this cooperative team, formally adopted by the boards of education of the participating schools for the 2016-2017 and 2017-2018 school terms, detailing your agreement in respect to insurance, coaching personnel and compensation, liability, facilities, equipment, etc. It must indicate that procedures are established for checking on student eligibility and comptying with all IHSA By-Laws. Local policies which will be implemented in respect to training rules, academic standards, etc., must be agreed upon. (Copy of the intergovernmental agreement must accompany each request.)

SCHOOLS ORECON C.V,S.D # 220		ENTS' SIGNATURES		PRINCIPALS' SIGNATURES		
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	Offic	ial IHSA Action	Swart Christian School			
above application for cooperative team sponsorshi	p IS ISN	OT granted for the 201	6-2017 - 2017-2018 scho	ool teans.		
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9. This document is to certify that formation of this cooperative team will not reduce participation opportunities for students in any of the cooperating schools.