

COMBINED SCHOOLS END OF SEASON REPORT

Please submit to the Section office as follows: Fall Season - November 30

| Fall Season | - | November |
|---------------|---|----------|
| Winter Season | - | March 20 |
| Spring Season | - | June 20 |

*All portions of this report are required to be filled out before submission.

| School Year: | | | | | |
|--|--------------------------------------|-----------------|-------------------------|--|--|
| Sport: | | | | | |
| Season: Fall Winter Spi | ring | | | | |
| <u>Schools Involved</u> : | <u>Enrollment</u> : (Grades 9-11) | Classification: | Number of participants: | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Host School: | | | | | |
| Classification of Combined Team: (AA, A, B, C, D – use total enrollment) | | | | | |
| League Affiliation of Combined Team: | | | | | |
| 1. Overall evaluation of the comb | ined program: | _ | | | |
| 2. Problems encountered: | - | | | | |
| 3. Will you combine again for this sport? | | | | | |

- 4. Please include a copy of your final roster (student-athlete name, school, and grade).
- 5. Please list season win/loss record including scores of each contest:
- 6. Please include Section VI results:

Submitted by: ____ Date: ____

Please return by email to: bfadeley@e1b.org