

## ECIC PRE SEASON REPORT

DATE:

**CHAIRPERSON NAME:** 

SPORT:

ATHLETIC DIRECTOR LIASON NAME:

**MEETING LOCATION:** 

## Attendance:

Alden	Hamburg	Lake Shore	Tapestry Charter
Amherst	Holland	Lancaster	Tonawanda
Cheektowaga	Iroquois	Maryvale	West Seneca East
Clarence	Jamestown	Orchard Park	West Seneca West
Cleveland Hill	JFK	Pioneer	Williamsville East
Depew	Frontier	Springville	Williamsville North
East Aurora	Global Concepts	Starpoint	Williamsville South
Eden	Lackawanna	Sweet Home	Williamsville Central

COACHES CONTACT LIST – (Name, Email address and Cell #) Attach separate sheet

Dates, sites and times chosen for Championships?

Date chosen for Post Season Meeting?

**PROPOSALS:** 

OTHER CONCERNS, ITEMS OF IMPORTANCE:

GOOD OF THE ORDER: (i.e., Combining of Schools, Alignments, Championship Format, etc....)

**RETURN FORM TO: Rachel Berent at** <u>rberent@e1b.org</u>