



NEW YORK STATE  
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

SENIOR ALL-STAR CONTEST  
Application

**PLEASE NOTE: PARTICIPANTS MAY ONLY BE THOSE SENIORS WHO ARE NO LONGER INVOLVED IN SECTIONALS, REGIONALS OR STATE COMPETITION. ATHLETES PARTICIPATING IN THIS CONTEST ARE NO LONGER ELIGIBLE IN THIS SPORT.**

Sport or Activity \_\_\_\_\_

1. Name of Contest \_\_\_\_\_ Date \_\_\_\_\_

2. Site of Contest \_\_\_\_\_

3. Co-sponsoring school, league or section \_\_\_\_\_  
(for events sponsored with any outside organization, college or university)

4. School personnel responsible for contest supervision: Name \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

5. School personnel responsible for screening and selection of contestants: \_\_\_\_\_  
\_\_\_\_\_

6. School personnel responsible for screening and selection of coaches: \_\_\_\_\_  
\_\_\_\_\_

7. Net profit to be donated to the following charitable or educational programs: \_\_\_\_\_  
\_\_\_\_\_

8. Contestants will be insured by: \_\_\_\_\_ Own School  
\_\_\_\_\_ Other(list)

Liability insurance supplied by sponsor: \_\_\_\_\_ Section \_\_\_\_\_ Other (List)\* \_\_\_\_\_

**\*Attach certificate of insurance**

9. Signature of host Athletic Administrator (if applicable): \_\_\_\_\_

10. Uniforms are to be supplied by: \_\_\_\_\_

11. Officials' organization to assign contest officials: \_\_\_\_\_

12. Within two weeks of completion of the contest, all of the following must be mailed to  
**Secretary/Treasurer of the Section** sanctioning the contest:

- |                                    |                           |
|------------------------------------|---------------------------|
| 1. Complete roster of participants | 3. Injury report          |
| 2. Complete financial report       | 4. Complete awards report |

Completed application presented and approved by Section \_\_\_\_\_

Date \_\_\_\_\_ Section Executive Director \_\_\_\_\_

NOTE: Contests approved by the Section must be mailed for recording to:

Robert Zayas, Executive Director  
New York State Public High School Athletic Association, Inc.  
8 Airport Park Boulevard  
Latham, NY 12110

NYSPHSAA, Inc. USE ONLY:

Application complete \_\_\_\_\_ Date \_\_\_\_\_

Application returned  
as incomplete \_\_\_\_\_

Executive Director



**NEW YORK STATE  
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION**

**SENIOR ALL-STAR CONTEST**

**CRITERIA**

Application for approval of a Senior All-Star Contest shall be submitted to the New York State Public High School Athletic Association after approval by the Section Executive Director. Approval will be granted if all the required forms are properly completed and all of the following provisions satisfied:

1. The contestants shall be seniors who have completed their secondary school eligibility in that sport. No contestant shall still be involved in Sectional, Regional or State competition.
2. Only school personnel shall be responsible for the screening and selection of contestants for participation in the contest.
3. Only school personnel shall be responsible for the screening and selection of coaches for conducting the contest.
4. A contestant may participate in no more than one approved Senior All-Star Contest in the same sport during the school year.
5. All participants and personnel involved in an approved Senior All-Star Contest must sign the NYS PHSAA Letter of Intent.
6. All contestants must be bona-fide students from schools who are members of the New York State Public High School Athletic Association and such contests must be conducted in New York State.
7. The contest shall have an established charitable or educational purpose; the financial arrangements of the contest shall reflect an accomplishment of that purpose, and all net receipts from the contest shall be utilized for such purpose. Net receipts shall be gross receipts less expenses directly connected with the administration and conduct of the contest. Gross receipts shall include all revenues derived from the contest. Financial records must be clearly specified in the application for approval according to the terms of the agreement and meet the criteria as approved by the New York State Federation of Secondary School Athletic Associations.
8. Applications must meet guidelines as to safety, number of practices prior to contest, insurance, Commissioner's Regulations, awards and other requirements determined by the New York State Federation of Secondary School Athletic Associations and the individual association.
9. All contests must be conducted within the approved sport season.
10. Commercial sponsors would be discouraged and should not be necessary for conducting a viable Senior All-Star Contest.



NEW YORK STATE  
PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION

SENIOR ALL-STAR CONTEST

Letter of Intent

I \_\_\_\_\_ will participate in the following contest:

Name of Contest \_\_\_\_\_

Sport to be Contested \_\_\_\_\_

Date of Contest \_\_\_\_\_

Site of Contest \_\_\_\_\_

I fully understand the following rules, regulations, guidelines and laws governing my participation in such a contest as printed in the criteria on page 1 of this letter. I also understand that:

1. I am permitted to play in only one approved Senior All-Star Contest in this sport.
2. I am no longer eligible in this sport.
3. I am no longer participating in Sectionals, Regionals or State competition in this sport.
4. I have not played in any non-approved Senior All-Star Contest in the last year.

**Failure to meet the criteria above will result in the loss of your high school eligibility in this sport.**

Signed \_\_\_\_\_ School \_\_\_\_\_  
(athlete)

Signed \_\_\_\_\_  
(parent or legal guardian)

Signed \_\_\_\_\_  
(witness)

(School personnel responsible for screening and selection of contestants)

Date \_\_\_\_\_

Attach to roster of game participants and mail with post game report to Secretary/Treasurer of the section in which contest takes place.

SENIOR ALL-STAR CONTEST

Roster

Name of Contest \_\_\_\_\_ Date \_\_\_\_\_

Sport Contested \_\_\_\_\_ Site \_\_\_\_\_

School personnel responsible for contest supervision:

Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**CONTESTANTS** (print)

	<u>Name</u>	<u>School</u>	<u>Grade 12 Graduate</u>	<u>Ht.</u>	<u>Wt.</u>	<u>Address</u>	<u>Phone</u>
1.	_____	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____	_____	_____
10.	_____	_____	_____	_____	_____	_____	_____
11.	_____	_____	_____	_____	_____	_____	_____
12.	_____	_____	_____	_____	_____	_____	_____
13.	_____	_____	_____	_____	_____	_____	_____
14.	_____	_____	_____	_____	_____	_____	_____
15.	_____	_____	_____	_____	_____	_____	_____
16.	_____	_____	_____	_____	_____	_____	_____
17.	_____	_____	_____	_____	_____	_____	_____
18.	_____	_____	_____	_____	_____	_____	_____
19.	_____	_____	_____	_____	_____	_____	_____
20.	_____	_____	_____	_____	_____	_____	_____

**MUST BE RETURNED WITHIN TWO WEEKS AFTER CONTEST TO SECRETARY/ TREASURER OF YOUR SECTION.**

(Additional listing space on back)

Name                      School                      Grade 12      Ht.      Wt.      Address                      Phone  
Graduate

21. \_\_\_\_\_  
22. \_\_\_\_\_  
23. \_\_\_\_\_  
24. \_\_\_\_\_  
25. \_\_\_\_\_  
26. \_\_\_\_\_  
27. \_\_\_\_\_  
28. \_\_\_\_\_  
29. \_\_\_\_\_  
30. \_\_\_\_\_  
31. \_\_\_\_\_  
32. \_\_\_\_\_  
33. \_\_\_\_\_  
34. \_\_\_\_\_  
35. \_\_\_\_\_  
36. \_\_\_\_\_  
37. \_\_\_\_\_  
38. \_\_\_\_\_  
39. \_\_\_\_\_  
40. \_\_\_\_\_  
41. \_\_\_\_\_  
42. \_\_\_\_\_  
43. \_\_\_\_\_  
44. \_\_\_\_\_  
45. \_\_\_\_\_  
46. \_\_\_\_\_  
47. \_\_\_\_\_  
48. \_\_\_\_\_

**SENIOR ALL-STAR CONTEST**  
**FINANCIAL REPORT**

Name of Contest \_\_\_\_\_ Date \_\_\_\_\_

Sport Contested \_\_\_\_\_ Site \_\_\_\_\_

**RECEIPTS:**

Advance Sales ..... \$ \_\_\_\_\_  
Gate Receipts ..... \$ \_\_\_\_\_  
Program Sales ..... \$ \_\_\_\_\_  
Advertisements ..... \$ \_\_\_\_\_  
Entry Fees ..... \$ \_\_\_\_\_  
Radio/Television ..... \$ \_\_\_\_\_  
Other: \$ \_\_\_\_\_  
\$ \_\_\_\_\_

TOTAL RECEIPTS \$ \_\_\_\_\_

**EXPENDITURES**

Chairman's Expense ..... \$ \_\_\_\_\_  
Ass't. Chairman's Expense ..... \$ \_\_\_\_\_  
Officials ..... \$ \_\_\_\_\_  
Programs ..... \$ \_\_\_\_\_  
Program Sellers ..... \$ \_\_\_\_\_  
Printing ..... \$ \_\_\_\_\_  
Tickets (tellers/sellers) ..... \$ \_\_\_\_\_  
Security ..... \$ \_\_\_\_\_  
Custodial ..... \$ \_\_\_\_\_  
Site Rental ..... \$ \_\_\_\_\_  
Concessions ..... \$ \_\_\_\_\_  
Sound System ..... \$ \_\_\_\_\_  
Game Management (scorers etc.) ..... \$ \_\_\_\_\_  
Other: \$ \_\_\_\_\_  
\$ \_\_\_\_\_

TOTAL EXPENDITURES \$ \_\_\_\_\_

Signature \_\_\_\_\_ TOTAL RECEIPTS \$ \_\_\_\_\_

Date \_\_\_\_\_ TOTAL EXPENDITURES \$ \_\_\_\_\_

**Submit this report to your Section Secretary/Treasurer** within two weeks after completion of the contest.