CO-OP PROGRAM RENEWAL FORM

(This form is completed by the appropriate school district(s) and submitted to the CHSAA office each year for which the co-op is requested.)

Renewal requested for the _____ school year.

List schools and the previous year total enrollment for each school that have been approved by the respective Boards of Education and the Colorado High School Activities Association to participate in this cooperative program.

School	Total Enrollment	School	Total Enrollment
1.		1.	
2.		2.	
3.		3.	

List the sports that have been approved by the respective Boards of Education and the Colorado High School Activities Association for cooperative programs:

1.	4.
2.	5.
3.	6.

On behalf of the Board of Education, I request a renewal of the above cooperative programs:

1._____
Superintendent School District Date

2._____
Superintendent School District Date

3._____
Superintendent School District Date

4._____
Superintendent School District Date

DEADLINE FOR RENEWAL: Prior to the start of the competitive season for the sport in question.

CONTACT PERSON:

Name _____ School _____

Address _____

MAIL TO:
Bethany Schott, Assistant Commissioner, CHSAA, 14855 E. Second Avenue, Aurora, CO 80011

Official Action of the CHSAA

The above request for cooperative sponsorship has been reviewed by the CHSAA Assistant Commissioner with the following action taken:

☐ APPROVED ☐ DENIED DATE _____

Signed _____, CHSAA Assistant Commissioner