

APPLICATION FOR COOPERATIVE SPONSORSHIP OF AN ACTIVITY IN SECTION 2

Schools involved in the proposed, cooperative agreement must complete a separate application form before the Section 2 Merger Committee will take action. A separate application must be submitted for each activity. Additional copies of this form are available from the Secretary of Section 2 or a photocopied form is acceptable.

A fully completed copy of this form must be returned to: Section 2 Merger Committee at the Section 2 Office, 433 Broadway, Suite 301, Saratoga Springs, NY 12866, according to the following schedule:

Fall Sports – April 1 (Football - February 1)

Winter Sports – August 1

Spring Sports – January 1

PART I

School: Averill Park

Address: 1216 Gettle Rd.

Zip: 12018

Averill Park, NY

Other Schools Involved: Troy + Tamarac

Activity to be Combined: Sport: Girls Swimming + Diving level(s) Varsity/JV

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ENROLLMENT GRADES 9-11 OF THIS SCHOOL: 665

ENROLLMENT GRADES 9-11 OF OTHER SCHOOL INVOLVED: 1,102

TOTAL ENROLLMENT: 1,767

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Conditions, which prompted your school to file for a merger (Please do not use continuation as a condition.):

- no program at Averill Park
 - no pool at Averill Park
- _____

.....
PLEASE FORWARD THIS FORM TO THE EXECUTIVE OFFICER OF THE LEAGUE OR SUBLEAGUE IN WHICH THE PROPOSED MERGER TEAM WILL PARTICIPATE FOR ACTION.

WHEN THIS FORM IS RETURNED TO YOU, FORWARD TO the Section 2 Office, 433 Broadway, Suite 301, Saratoga Springs, N. Y. 12866

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PLEASE FORWARD THIS FORM TO THE EXECUTIVE OFFICER OF THE LEAGUE OR SUBLEAGUE IN WHICH THE PROPOSED MERGER TEAM WILL PARTICIPATE FOR ACTION.
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PART II – LEAGUE ACTION

NAME OF LEAGUE Suburban Council

This request for cooperative sponsorship is (approved / not approved).

Vote of member schools:

YES; NO; ABSTAIN

SIGNATURE OF EXECUTIVE OFFICER [Signature]

POSITION League President

SCHOOL Columbia

DATE 3/7/2021

If the request is not approved, attach a list of reasons to this form.

LEAGUE EXECUTIVE OFFICER: PLEASE RETURN THIS FORM TO THE SUPERINTENDENT OF THE SCHOOL INVOLVED AT THE ADDRESS INDICATED IN PART ONE OF THIS FORM. THANK YOU.

PART III – ACTION OF THE SECTION 2 MERGER COMMITTEE

The above request for cooperative sponsorship is (approved / not approved) for the sport of _____ for the school year of _____.

CLASSIFICATION OF THE MERGED TEAM: _____

Signature of Merger Committee Chairman: _____

Date: _____

If not approved, reason (s): _____

List the number of students from your school that participated in this activity. Use zero (0) if your school has not sponsored the activity in the past.

	DATES			GRADES		
	8	9	10	11	12	
LAST SCHOOL YEAR	'19-'20		1			
CURRENT SCHOOL YEAR	'20-'21	3	1	2	5	1

What will be the name of the combined team? Troy/Averill Park/Tamarac

Where will practices be held? Troy

Where will home competitions be held? Troy

Which school will be responsible for administering the program? Troy

Name of Athletic Director responsible for administering the program:

NAME Paul Reinsch SCHOOL Troy

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Please attach a copy of the action item from your Board of Education meeting minutes, which include the approval of this application.
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Other information, which may assist the Section 2 Merger Committee in reaching a decision on this application:

A 3 way merger makes sense based on geography and participation numbers.

SIGNATURES: BOARD OF EDUCATION PRESIDENT

SUPERINTENDENT OF SCHOOLS _____

HIGH SCHOOL PRINCIPAL _____

ATHLETIC DIRECTOR _____

DATE OF APPLICATION 3/9/21