

APPLICATION

BREITBARD CERTIFICATE

_____ All League

_____ League

_____ Year

GIRLS' WATER POLO

Sport

(NOTE: SELECTIONS SHOULD BE TYPED - REMEMBER TO USE FULL NAME OF SCHOOL, NOT ABBREVIATIONS. REMINDER THERE IS A \$5.00 REPLACEMENT FEE FOR CERTIFICATES PRINTED INCORRECTLY.)

FIRST TEAM

FIRST NAME	LAST NAME	SCHOOL	GRADE LEVEL
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

SECOND TEAM

1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

*One Athlete of the Year _____

Championship Team _____

Submitted by _____
Signature Phone No.

School _____

*Select only one Athlete-of-the-Year who must also be a member of the first team.

(waterpolo-women.brietbardalleague.doc)