

BASHOF

SCHOOL FORM

(ONLY fill out if affiliated with a School District)

Name: _____ Date: _____

District: _____

Number of Students: _____ Male: _____ Female: _____

Grade Levels: _____

Athletic Facilities-please describe (e.g. gym, soccer field, etc.):

Other organizations, if any, utilizing above facilities—please list:

PROGRAM(s):

*Type (Organization)	Sport or Event	Date and/or Times in use	Youth Participating	Male (%)	Female (%)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

* Include after-school program(s), summer program, etc.