Minnesota State High School League 2100 Freeway Blvd., Brooklyn Center, MN 55430-1735 763-560-2262, Fax: 763.569.0499

Application for Cooperative Sponsorship

Deadline: Not later than 30 days prior to the first day of practice for that sport season.

PLEASE SEE BYLAW 403.2 (A-C) and 403.4 (A-D) (amended May 15, 2017) FOR INFORMATION REGARDING REQUIRED DOCUMENTATION AND APPLICATION PROCEDURE

The	governing board	ds of each particip	ating school	must jointly	make ap	plication for co	operativ	e sponsorshi	p.	
On	behalf of the folk	owing schools, we 023 - 2024 schoo	hereby apply			nsorship of _	Hos	Key (Adapted-Cl or Pl)	
List	ALL schools inc	luded in the coop	erative spons	orship. Atta	ch anoti	ner form if nece	essary.		•	
		School		Enrollment City (9-12)*				Administrativ		
	High School #1:	Hope Lutheran High School		62	Winona			Region** 1A	Section**	
	High School #2:	Cotter	Her		Winon			IA	14	
	High School #3:	Lewiston		211	Lewiston			1 Pe	14	
	High School #4:	Winona Jenior His		746	Wi	nong		194	14	
	*Enrollment reported to the State of Minnesota on October 1 of the previous school year. **Current (Number and Class)									
2.	To any of the above schools belong to a conference in this activity? ✓ Yes This application must include a review and comments from the conference(s) of which the schools are members. ☐ No ☐ No ☐ Yes An application for dissolution must be submitted for the existing agreement. ☐ No ☐ No ☐ No ☐ No ☐ Describe the conditions which have prompted your request to co-sponsor this activity. (See model resolution at									
	www.mshsl.org/About MSHSL/Membership Information: A History & Model Resolution for School Boards)									
4.	We have students who are interested in partipacting in the above activity! The first who are interested in partipacting in the above activity! The first who are interested in partipacting in the above activity during the previous year. If the school did not approved in this activity during the previous year. If the school did not approved in this program last year, indicate the number of students expected to participate in this cooperatively sponsored activity this year if approved.									
i	sponsor the program	gram last year, indicate the number of			<i>to participa</i> th	te in this cooperat	ively-spon	sored activity this	yea <i>r if approved.</i>	
	High School #1			1		Y			1	
	High School #2					j			2	
Ì	High School #3		3							
	High School #4			1		5	٤ ا	1	6	
i	Team Identification: (Indicate how cooped schools should be identified in tournament programs):									
	ream Colors: Orange / Black Team Mascot: Winhauks									
	Host School (school that will receive revenue share check): Winana Senior (figh									
	Board of Ede	cation (or desig	nee)			School		J	Date	
ign	ed 🔏 👌	Sungly	7) //			Lutheran High	-	<u> </u>	5-30-23	
ign	ed Mary	Gillert		(otter	- Selvso	ls	7	-17-23	
ign	ed)		·						
Sign	ed			(
		Off	icial Action	of the MSH	SL Boar	d of Directors	i			
		☐ Approved ☐ Not Approved								
Siar	nature:			Date:						
a,	N	ASHSL Executive	Director							

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