



Cooperative Team Renewal Request

Deadlines for submission of renewal requests:

Aug. 1=Fall sports/activities; Oct. 1=Winter sports/activities; Feb. 1=Spring sports/activities

For 2023-24 & 2024-25
Cooperative Teams
Renewals Only

For criteria under which cooperative teams may be formed, refer to Section 2.030 of the By-laws and Section 26 of the Administrative Procedures, Guidelines and Policies Section in the IHSA Handbook with Illustrations.

1. This request must include the following:

- Completed application
- **letters from the presidents of ALL conferences** of which each school in this cooperative are members for **ANY** sport/activity, certifying that this cooperative team has been approved by the conferences
- a letter from the president of the conference of which this cooperative team will be a member during the co-op, certifying that this cooperative team has been approved for participation in the conference.
- *(If this cooperative team will **not** participate in a conference, attach letters approving the cooperative team from seven (7) schools on its upcoming schedule. These are in addition to the conference approval letter(s).)*
- Renewal requests must be submitted to IHSA by the deadlines date indicated above.

Any changes to the co-op will require a new application along with all required documents specified in the application instructions.

2. This renewal request is for cooperative sponsorship of a team for the classification cycle of _____ and _____. (e.g., 2023-24 & 2024-25)

| | | |
|-----------------------------------|---------------------------|--|
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |
| _____ (Specify Gender of Team) | _____ (Sport/Activity) | _____ (Cooperative Team Conference) |

3. NAME OF SCHOOLS

CITY

ALL CONFERENCE AFFILIATIONS
OF EACH SCHOOL IN COOPERATIVE

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

4. The following signatures certify that formation of this cooperative team will not reduce participation opportunities for students in any of the cooperating schools and has been approved by formal vote of the boards of education and administrations of all schools in the cooperative.

SCHOOLS

PRINCIPALS' or OFFICIAL IHSA REPRESENTATIVES' SIGNATURES

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Official IHSA Action

The above renewal for cooperative team sponsorship IS IS NOT granted for the following classification cycle: **2023-2024** and **2024-2025**.

(Date)

Authorized IHSA Administrator