

INTENT TO PARTICIPATE DECLARATION

**THIS INFORMATION MUST BE RETURNED/FAXED TO YOUR SECTION
OFFICE BY FRIDAY, NOVEMBER 20, 2009**

If selected to participate in the 2009 CIF State Football Championship Bowl Games

School

WE WILL _____ WILL NOT _____ PARTICIPATE

School Principal

Date

Coach

**If your school chooses to participate, if selected, do you know if your band would like to
perform at half time? _____ YES _____ NO**

**(If you don't know, please inform the director no later than at the information meeting/press availability on
Monday, December 14, 2009.)**