

PHILADELPHIA CITY H.S. ALL-STAR FOOTBALL GAME

Public Team Information/Scholarship Form

Name _____ High School _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Cell Number _____

E-Mail Address _____

Position(s) _____ Jersey No. _____ Height _____ Weight _____

T-Shirt Size: **Please circle one**

Medium Large XL XXL 3XL 4XL

Short Size: **Please circle one**

Medium Large XL XXL 3XL 4XL

SAT SCORES – Verbal _____ Math _____ ACT SCORE _____

Please attach the following copies to this form: School Transcript & SAT/ACT Scores

OVERALL GPA _____ CURRENT GPA _____

College Acceptances _____

Academic Awards _____

Community Service _____

This Form must be returned by Parent's Night on Tuesday, March 20.

“A Great Game For A Great Cause”

PHILLYALLSTARFB.ORG

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