

# CONGRATULATIONS!

As a **First Place Winner; Scorer of 16 or more points** at a Class State Championship or State Open (relays count as 6 points for 2<sup>nd</sup>, 5 for 3<sup>rd</sup>, 4 for 4<sup>th</sup>, 3 for 6<sup>th</sup>, 2 for 7<sup>th</sup>, and 1 for 8<sup>th</sup>); **Winner** of the Heptathlon, Decathlon, Steeplechase, or Hammer Throw; or finishing in the **Top 6 at New Englands'**, you have earned a place on the **2020 All-State Outdoor Track and Field Team!**

Members of the All-State team will be honored at a dinner ceremony that will take place on **Wednesday, June 24, 2020**, at the **Aqua Turf Club** located at 556 Mulberry St, Plantsville (Southington) CT 06479.

All-State athletes are invited to attend **at no charge**, but you must **RSVP**, using the form below. Your family, friends, school administrators, athletic director, and coaches are invited to attend and support your efforts at a cost of \$41 each!

**Reservation deadline is Friday, June 19<sup>th</sup> at 3pm. NO WALK-INS!!!!**

**RESERVATION INFORMATION:** All-State athletes will be free guests of CHSCA, but must RSVP. Cost for other attendees is **\$41** per person. PLEASE NOTE that \$1 of that will be going to the "Wounded Warrior" program –visit the CHSCA website for more details!

**DINNER DETAILS:** Wednesday, June 24, 2020  
Aqua Turf Club – Plantsville (Southington), CT  
5:30 PM – Arrival and Check-in  
5:45 PM - Photos Begin  
6:00 PM –**SHARP!** Banquet Begins- awards followed by dinner

Table assignments will be available at the door on the evening of the dinner.

Send this form with appropriate payment amount to/or direct all questions to:

Coach William Vanderrest  
90 Great Pine Path  
Plantsville, CT 06479  
860-508-1630 or email: [cttrackandfieldallstate@hotmail.com](mailto:cttrackandfieldallstate@hotmail.com)

**DEADLINE: FRIDAY, JUNE 19th at 3 pm NO WALK-INS!**  
PLEASE USE THIS FORM OR A DUPLICATE TO RESERVE SEATS! (**DETACH and RETURN**)

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**Reservation Form**

**Athlete Name (Print):** \_\_\_\_\_ **School** \_\_\_\_\_

**Boys or Girls Team (Please Circle)**

**Additional Reservations**

(Names of others who will also be attending)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

( ) Additional reservations on back

<b>Number of guests:</b> _____	<b>(NO CHARGE FOR ATHLETE)</b> (Includes \$1 to the "Wounded Warrior" program-Thank You!)
<b>X \$41</b>	
<b>TOTAL:</b> _____	
<b>Check #</b> _____	<b>(payable to <u>CHSCA</u>)</b>

Name of person making this reservation: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Please provide an email for confirmation of your reservation: \_\_\_\_\_