

Enclosed you will find the following material for the Ken Lantzy All-Star Football Game:

- (1) Letter of Agreement (Form B) must be sent in by April 30
- (2) Insurance Form (Form D) must be sent in by April 30
- (3) Release Form (Form E) must be sent in by April 30
- (4) University of Pittsburgh at Johnstown (Form UPJ) must be sent in by April 30
- (5) Jersey Number (Form F) must be sent in by April 30
- (6) Advertising Forms (Form C) must be sent in by April 30
- (7) Program Ad Page Checklist. Keep for your reference
- (8) Equipment Letter (Form G) keep for your reference
- (9) Banquet Form (Form J) must be sent in by April 30
- (10) Listing of Participating Schools (Form L) keep for your reference
- (11) Picnic Form - (Form P) keep for your reference
- (12) Players T Shirt and Shorts sizes (Form T) must be sent in by April 30
- (13) T Shirt, Shorts order Form (Form S) - must be sent in by April 30
- (14) Academic Scholarship (Form H) must be sent in by June 15
- (15) Schedule of Events - keep for your reference

***** PLEASE NOTE *****

If name or address is misspelled or incorrect please contact us.

In closing, all information should be returned to me at the following address:

FAX TO: (814) 535-5029 OR MAIL to:
KEN LANTZY ALL-STAR GAME
307 Bedford Street
Johnstown, Pa. 15901

DEADLINE FOR ACCEPTANCE TO PLAY IN THE GAME is April 30, 2014

NAME: _____ SCHOOL: _____

FORM B

**AGREEMENT AND ACCEPTANCE OF INVITATION TO PARTICIPATE IN
THE 2013 KEN LANTZY ALL-STAR FOOTBALL GAME**

I accept your invitation to be a competitor in the Ken Lantzy All-Star Game to be played on Friday, June 14, 2013. I agree to report for, follow the practice schedule, participate in all activities, and follow all regulations which may be established by the organizers and consultants of the Ken Lantzy Committee and their agents, and I will exercise care in the pursuit of good safety and health practices.

I hereby release the Southern Alleghenies Football Coaches Association, the Ken Lantzy Finest "40" Inc, the Ken Lantzy Committee and the Game Consultants from liability for injuries or losses of any kind which may occur in connection with my participation in the Lantzy Game, directly or indirectly, including my travel associated with said contest; and injuries or losses of any kind which may result from any act of omission of the Southern Alleghenies Football Association, the Ken Lantzy Finest "40" Inc., the Ken Lantzy Committee and the Game Consultants.

I further understand that certain insurance will be provided to me (with benefits as provided in the policy) free of any cost. Any parent or guardian wishing to see a copy of the contract may do so upon request at any time by contacting Game Consultants through the Southern Alleghenies Football Coaches Association.

DATE: _____

PARTICIPANT'S SIGNATURE

***** MUST BE FAXED OR MAILED BY APRIL 30, 2013 *****

NAME: _____ **SCHOOL:** _____

FORM C

**KEN LANTZY FINEST “40” ALL-STAR FOOTBALL GAME ADVERTISING
FORM**

Cost \$500.00

This ad can be made up by either one sponsor in the amount of \$500 or 50 sponsors of \$10 each or any combination of the two. Enclosed you will also find a copy of last year’s program which may be of some help to you in designing your full page ad.

Please send a rough draft layout, either typed or printed, on an 8 1/2 x 11 sheet of paper with desired wallet size picture attached.

Please make checks payable to:

Ken Lantzy All-Star Game

Send checks AND COPY OF YOUR PROGRAM ADVERTISING PAGE (ROUGH DRAFT, IF POSSIBLE USE A COMPUTER) to:

KEN LANTZY ALL-STAR GAME
307 Bedford Street
Johnstown, Pa. 15901

DEADLINE DATE: April 30, 2013

NAME: _____ SCHOOL: _____

FORM D

**KEN LANTZY FINEST "40" ALL-STAR FOOTBALL GAME ADVERTISING
FORM**

I am pleased to inform you that the Ken Lantzy Finest "40" Inc. has secured the following insurance coverage protecting your son from injury while participating in the Ken Lantzy All-Star Football Game. The coverage will be written through the NCAA recommended insurance program provided by Travel Guard Insurance, and it will have the following limits: \$1,000 death benefits, medical payments and catastrophic coverage \$100,000.

DESCRIPTION OF HAZARDS:

This Description of Hazards covers the Insured for injury sustained while:

- a. Participating in or attending any regularly scheduled activity of the Certificate holder. Such activity must be supervised by a person authorized by the Certificate holder.
- b. Traveling directly to and from such regularly scheduled activities with other members as a group. Such travel must be supervised by a person authorized by the Certificate holder.
- c. Traveling directly to and from the insured's residence and the meeting Place for the purposes of participating in such activity.

Respectfully,
Ralph DeMarco
Game Chairman

(CUT OFF HERE)

We need your acknowledgement that you have read this letter and are satisfied with the insurance arrangements. Thank you for your cooperation.

SIGNATURE OF PARENT OR GUARDIAN PLAYER

Please Fax or Mail the cut-off part of this letter to:

Ken Lantzy All Star Football Game
307 Bedford Street
Johnstown, Pa. 15901

DEADLINE DATE: APRIL 30, 2013

NAME: _____ SCHOOL: _____

FORM E

**PARENTS OR GUARDIAN OF _____ IN THE 2014 KEN
LANTZY ALL-STAR FOOTBALL GAME**

RELEASE

We certify we are the parents or guardian of _____, and we are aware of this invitation to participate in the 2014 Ken Lantzy Game.

We consent to his participation, and in consideration for the invitation and benefits provided him, release the Southern Alleghenies Football Coaches Association, the Ken Lantzy Finest "40" Inc, the Ken Lantzy Committee and the Game Consultants from all liability from injuries or losses of any kind which he may sustain as a result of any activities in which he participates in connection with the transportation to and from practices and game, any injuries incurred in any practices in or on the facilities provided during the week of said practices, and injuries incurred in the game, regardless of whether the injury or loss resulted from any act or omission of the Southern Alleghenies Football Coaches Association, the Ken Lantzy Finest "40" Inc, the Ken Lantzy Committee or the Game Consultants against loss of any kind for any claim which might subsequently be brought for such injury or loss in violation of this release.

DATE: _____

PARENT(S): _____

***** MUST BE FAXED OR MAILED BY APRIL 30, 2013 *****

NAME: _____ **SCHOOL:** _____

FORM F

NOTICE:

Deadline for program advertising of your full-page ad is APRIL 30, 2014.

Also, please indicate your preference of jersey numbers, your high school, the college you plan on attending and RETURN WITH YOUR COMPLETED AD.

NAME: _____ **SCHOOL:** _____

COLLEGE _____

JERSEY NUMBER

FIRST CHOICE _____

SECOND CHOICE _____

THIRD CHOICE _____

* RETURN BY APRIL 30, 2014 WITH YOUR \$500.00 SPONSORSHIP AND PROGRAM AD PAGE *

NAME: _____ SCHOOL: _____

FORM G

Described below is a list of the equipment you will need for the Ken Lantzy All-Star Game the week of June 15 through June 20, 2014.

1. Helmet
2. Shoulder Pads, Thigh Pads, Knee Pads
3. Football Shoes
4. ALL WHITE Practice/Game Pants
5. Mouth Piece
6. Towels
7. Socks
8. T-Shirts
9. Any arm, hand pads, etc.

Your football coach or school will be able to supply you with items 1 thru 6. Please make sure your helmet has a current Certification.

Also, described below is the list of items that will be furnished to you.

1. Game Jersey
2. Practice Jersey
3. Shorts & T-Shirt
4. Breakfast, Lunch, Supper
5. Transportation for Meals
6. Housing at University of Pittsburgh - Johnstown
7. Picnic 6/15/2014
8. Banquet 6/19/2014
9. Team and Individual Photograph
10. \$1,000 Scholarship *
11. \$500 Scholarship **

*One \$1000 and Two \$500 Academic Scholarship will be awarded

**Ten \$500 Scholarships will be awarded - 5 to the North, 5 to the South

PLEASE NOTE

PLEASE NOTE

PLEASE NOTE

Each player is expected to wear his Ken Lantzy t-shirt and short set he receives at the picnic for all the meals listed on the schedule.

NAME: _____ SCHOOL: _____

FORM H

ARTHUR R. PALUMBO SCHOLARSHIP FOR ACADEMIC EXCELLENCE

Effective with the 1994 Game, the Ken Lantzy organization awarded a scholarship in the amount of \$1,000 in honor of an individual who has shown great support and annually contributes their efforts to enable the Ken Lantzy Finest "40" All-Star Game to be an athletic and academic highlight during a student's senior year.

This year's honoree will be announced at the banquet on Thursday, June 13th.

YEAR	HONOREE	SCHOLAR ATHLETE RECIPIENT
1994	Gerald Page	Adam Weber - Cambria Heights
1995	Arthur Palumbo	Mike Occhuzzo - Indiana
1996	David Kekich	Scott Moses - Westmont
1997	Paul Leonard	Adam Pardee - Laurel Valley
1998	John Caleby	Joshua Koontz - Bedford
1999	Ernie Fetzer	Michael Yoder - Somerset
2000	Ken Bussard	Justin Adder - Somerset
2001	Chuck Sponsky	Matthew Garner - Bellwood Antis
2002	Don Bailey	John Duray - Conemaugh Twp
2003	Phil DeMarco	Kevin Oreskovich - Bishop McCort
2004	Denny Stahl	Steve Wilk - Blairsville
2005	Lindsey King	Josh Vargo - Bishop McCort
2006	Ralph DeMarco	Adam Highberger - Blairsville
2007	Rhonda Menniti	Michael Tomovich - Chestnut Ridge
2008	Dave Seidel	Shane McGregor - Central Cambria
2009	Jim Cascio	Ben Ridgley - Central Cambria
2010	Eber Verhovsek	Paul Detwiler - Bedford
2011	Steve Girona	Alex Will -- Berlin Brothersvalley
2012	Don Lowry	Colin Bryan -- Windber

Please fill out the following information to assist us in evaluating and selecting this year's recipient.

SAT SCORES: VERBAL _____ MATH _____ WRITING _____

College you will be attending _____

Class Rank _____ out of total Senior Class size of _____

If applicable, please convert GPA to number out of 4.0.

For example 3.8 out of 4.0, not 98.35 out of 100.

Senior Year Grade Point Average _____

Four Year Cumulative Grade Point Average _____

Enclose a current transcript from your High School.

Enclose a listing of Academic Honors Achieved in High School.

Enclose a listing of Community Service Activities during High School.

The final six (6) applicants will be interviewed by the selection committee.

MUST BE FAXED OR MAILED BY JUNE 15, 2014.

NAME: _____ SCHOOL: _____

FORM UPJ

UNIVERSITY OF PITTSBURGH - JOHNSTOWN
THE CONFERENCE CENTER
TERMS OF RESIDENCE AGREEMENT

INDEMNITY AND DAMAGES

STUDENT is liable for all damages resulting from participant utilization of the facilities and services provided by the UNIVERSITY. STUDENT will also reimburse the UNIVERSITY for all damages to facilities and services of the UNIVERSITY resulting from the use of those facilities and services by STUDENT. In addition, the terms and conditions of this agreement do not require the UNIVERSITY to relinquish its control of its facilities and services to STUDENT. The UNIVERSITY retains the right to require STUDENT to leave the UNIVERSITY premises if the UNIVERSITY feels that circumstances require it. The UNIVERSITY assumes no responsibility for loss or theft of personal property, or damage to personal property of STUDENT. STUDENT shall indemnify and hold harmless the UNIVERSITY, its officers and employees, against any and all claims for loss, injury or damage to persons or property arising out of activities conducted by STUDENT in UNIVERSITY buildings, properties, or facilities. The UNIVERSITY assumes no liability whatsoever for any property placed by STUDENT in UNIVERSITY building on UNIVERSITY properties.

UNIVERSITY RIGHTS

To enter the room for the purpose of inspections, repair, or emergency.

PARENTAL RELEASE

(If applicable, Parent(s) Signature(s))

By signing below, I agree and understand that I will be financially responsible for any damage I cause on the University of Pittsburgh at Johnstown Campus during the Ken Lantzy practices as well as a \$25.00 fee for any room key that is not returned to U.P.J.

PLAYER SIGNATURE

Social Security Number

***PLEASE RETURN VIA MAIL OR FAX NO LATER THAN APRIL 30, 2014 ***

NAME: _____ SCHOOL: _____

Form J

TO: KEN LANTZY FINEST "40" ALL-STAR PLAYERS and PARENTS

RE: 2014 KEN LANTZY FINEST "40" BANQUET

The 2014 Ken Lantzy All-Star Banquet will be held Thursday, June 13, 2013, at Sunnehanna Country Club, Sunnehanna Drive, Johnstown, Pa. Time: 7:30 PM

The charge will be \$30.00 per person with the exception of the players. Please fill out and return the bottom part of this form with your check made payable to Ken Lantzy All-Star Game and the number attending by Friday, April 30, 2014.

You will receive your tickets in the form of nametags and seating assignments the night of the banquet. If you have seating preferences with other families, please indicate on the form below and we will try to accommodate your request.

NAME OF PLAYER: MITCHELL HALL

(Please list individual(s) to be utilized for nametags)

GUESTS: _____	\$30.00
_____	\$60.00
_____	\$90.00
_____	\$120.00
_____	\$150.00

PLEASE RETURN TO: KEN LANTZY ALL-STAR GAME
307 BEDFORD STREET
JOHNSTOWN, PA. 15901

NAME: _____ SCHOOL: _____

Form P

KEN LANTZY ALL-STAR GAME PICNIC

SUNDAY, JUNE 15, 2014
PEOPLES NATURAL GAS PARK
JOHNSTOWN , PA

1:30 p.m. - 3:00 p.m.

An invitation is extended to all participants and their families to join our committee and coaching staff for a fully catered picnic.

It might be advisable to bring lawn chairs and/or blankets for your seating.

PLAYER'S NOTE:

Please bring your white football pants with pads, shoulder pads, and helmets to the picnic, as they will be needed for the photographs.
Please bring your helmets, which must have current Certification to the physicals for inspection.

DIRECTIONS TO THE PARK:

Directly across the street from POINT STADIUM.

Directions are posted on the website www.kenlantzy.org

NAME: _____ SCHOOL: _____

Form S

ADDITIONAL CLOTHING ORDERS

Players will be supplied with one pair of shorts and three T shirts. Use this form to order extras for family and friends. South team is gray shirts and navy shorts. North team is navy shirts and gray shorts.

NAME:

T SHIRTS NAVY	S	M	L	XL	XXL	XXXL	
PRICE	10	10	10	10	13	13	
QUANTY	___	___	___	___	___	___	
TOTAL	___	___	___	___	___	___	= \$ _____

T SHIRTS GRAY	S	M	L	XL	XXL	XXXL	
PRICE	10	10	10	10	13	13	
QUANTY	___	___	___	___	___	___	
TOTAL	___	___	___	___	___	___	= \$ _____

SHORTS - NAVY	S	M	L	XL	XXL	XXXL	
PRICE	14	14	14	14	14	14	
QUANTY	___	___	___	___	___	___	
TOTAL	___	___	___	___	___	___	= \$ _____

SHORTS - GRAY	S	M	L	XL	XXL	XXXL	
PRICE	14	14	14	14	14	14	
QUANTY	___	___	___	___	___	___	
TOTAL	___	___	___	___	___	___	= \$ _____

GRAND TOTAL = \$ _____

NAME: _____ SCHOOL: _____

PROGRAM AD PAGE CHECKLIST

You will be responsible for supplying the information that appears on your page in the game program. Here are some guidelines to help you prepare your submission. Please use a computer or typewriter to prepare your page if possible.

REQUIRED ITEMS

___ Good quality photo(s). This can be a senior picture or a football photo or both. To ensure a high quality reproduction please send original photos or digital photos on a disc. You may also email digital photos directly to the printer: **rmenniti@atlanticbbn.net**. If you choose this option please reference the Ken Lantzy game and your name in the subject line and also indicate on your program sheet that you have emailed the photo. Photos printed from a home computer generally do not reproduce well, which is why we request an original. Originals will only be returned if you include a stamped, self-addressed envelope.

___ Your name and the names of your parents.

___ Your high school name, football team name, and the names of your coaches.

___ Your height, weight, and the positions you play.

___ A complete list of your sponsors.

OPTIONAL ITEMS

___ College choice and/or career ambitions.

___ Awards and honors you have achieved or activities in which you participate.

___ Personal comments you wish to make.

NAME: _____ SCHOOL: _____

LIST OF PARTICIPATING HIGH SCHOOLS

NORTH TEAM

BEDFORD
BISHOP CARROLL
BISHOP GUILFOYLE
BLAIRSVILLE
CAMBRIA HEIGHTS
CENTRAL
CENTRAL CAMBRIA
CHESTNUT RIDGE
EVERETT
FOREST HILLS
GLENDALE
HOMER CENTER
MARION CENTER
NORTHERN BEDFORD
NORTHERN CAMBRIA
PENN CAMBRIA
PENNS MANOR
PORTAGE
PURCHASE LINE
TUSSEY MOUNTAIN

SOUTH TEAM

BERLIN
BLACKLICK VALLEY
BISHOP Mc CORT
CONEMAUGH TOWNSHIP
CONEMAUGH VALLEY
FERNDALE
JOHNSTOWN
ROCKWOOD
LIGONIER
MEYERSDALE
NORTH STAR
RICHLAND
ROCKWOOD
SALTSBURG
SHADE
SOMERSET
UNITED
WESTMONT
WINDBER

NAME: _____ SCHOOL: _____

Form T

Players sizes. Please circle correct sizes.

T Shirt Size S M L XL XXL

Short Size S M L XL XXL

***** MUST BE FAXED OR MAILED BY APRIL 30, 2014 *****