MDUSD School District/Govern (Name of school district/governing board) appointed the following individual(s) to serve for the 2024-20.	(1)	meeting
appointed the following individual(s) to serve for the 2024-202 representative:		late)
rentacentation	25 school year as the sch	iool's league
ichieselifatilde:		
PHOTOCOPY THIS FORM TO LIST ADDITION	AL SCHOOL REPRESENTA	ATIVES
NAME OF SCHOOL YandGO Valley Itich School		- 5 1
NAME OF REPRESENTATIVE Briana Zrelinski	POSITION Athletic	Director
ADDRESS 755 O.L Grove Rodd	CITY Concord	21P 94518
PHONE 925 685 8414 FAX	E-MAIL Zielinskil	æm dusdoorg
***************************************	**************	***********
NAME OF SCHOOL Yangers Valley High Schoo	L	
NAME OF REPRESENTATIVE Jonathan Pike	POSITION Princip	
ADDRESS 155 Oak Grove Road	CITY CONCORE	ZIP 94518
PHONE 925 685 8414 FAX	E-MAIL Pikejema	lusdrorg
	***********	********
NAME OF SCHOOL Yangas Valley High School		
JAME OF REPRESENTATIVE Amanda Loushin	POSITION Vice Prim	cip4
DDRESS 735 Oak Grove Road	CITY CONLOY &	ZIP 94518
HONE 925 6858414 FAX	E-MAIL Loushing	mdusd.org
***************************	*********	**********
AME OF SCHOOL		
AME OF REPRESENTATIVE	POSITION	
DDRESS	CITY	ZIP
	E-MAIL	
IONE FAX		

Please complete the form below for each school under your jurisdiction and RETURN TO THE CIF SECTION
OFFICE no later than June 28, 2024.
Mt Dablo Unified S.D. School District/Governing Board at its 5/8/24 meeting,
(Name of school district/governing board) (Date)
appointed the following individual(s) to serve for the 2024-2025 school year as the school's league
representative:
PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES
NAME OF SCHOOL Noveligate High School
NAME OF REPRESENTATIVE Kelly cooper Position Principal
ADDRESS UZE Castle Rode Rd CITY Walnut Gizele 79578
PHONE 925 978 -0900 FAX E-MAIL COOPERICO modusa-arg

NAME OF SCHOOL Northgate Lts
NAME OF REPRESENTATIVE Tyler ROSe crans Position Vice Principal
ADDRESS 425 Castle Rock Rd Walnut Creek CITY ZIP 94598
PHONE 925938-0900 FAX E-MAIL ROSEO MANS + (a) MANS & OTG

NAME OF SCHOOL November HS
NAME OF REPRESENTATIVE STUCKEY FAVYOR POSITION V.CE YMCIPAL
ADDRESS 425 Castle Rock Rd CITY-Walnut Cruber 94428
PHONE 925 938 0900 FAX E-MAIL tucker, farrar@ molusd.org

NAME OF SCHOOL Vartigati HS
NAME OF REPRESENTATIVE BENJAMIN BALLAND POSITION
ADDRESS 415 Casale Rock Rd CITY Walnut Cruck ZIP 94598
PHONE 925 938-0900 FAX E-MAIL Vallard 600 mausa over
If the designated representative is not available for a given <u>league</u> meeting, an alternate designee of the
district governing board may be sent in his/her place. NOTE: League representatives from public schools and
private schools must be designated representatives of the school's governing boards in order to be eligible to
serve on the section and state governance bodies.
Superintendent's or Principal's Name Kally Cooper Signature
Address Yrt Castle Rock Rd city Whint Cuck zip 94598
Phone 925 936-8900 FAX

PLEASE RETURN THIS FORM DIRECTLY TO THE CIF SECTION OFFICE.

Please complete the form below for each school under your jurisdiction and RETURN TO THE CIF SECTION

School District/Governing Board at its 5 2 meeting, (Date) appointed the following individual(s) to serve for the 2024-2025 school year as the school's league representative: PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES NAME OF SCHOOL NAME OF REPRESENTATIVE NAME OF SCHOOL NAME OF REPRESENTATIVE NAME OF REPRESENTATIVE NAME OF SCHOOL NAME OF REPRESENTATIVE NAME OF REPRESENTATIVE NAME OF SCHOOL NAME OF REPRESENTATIVE NAME OF SCHOOL NAME OF REPRESENTATIVE NAME OF SCHOOL NAME OF SCHOOL NAME OF SCHOOL NAME OF REPRESENTATIVE POSITION ZIP SCHOOL SCHOOL TO SCHOOL NAME OF SCHOOL NAME OF REPRESENTATIVE POSITION ZIP SCHOOL SCHOOL TO SCHOOL NAME OF SCHOOL NAME OF SCHOOL NAME OF SCHOOL NOTE: League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to	OFFICE no later than June 28, 2024.	101-11
NAME OF SCHOOL NAME OF SCHOOL COLLEGE PARK NAME OF SCHOOL COLLEGE PARK NAME OF SCHOOL COLLEGE PARK NAME OF REPRESENTATIVE Leviet (Fith position Principal CITY Plassability Zip 94723 PHONE 925-692-7670 FAX E-MAIL POSITION POSITION POSITION PRINCIPAL ADDRESS 201 VILLIA POSITION POSITION PRINCIPAL ADDRESS 201 VILLIA POSITION ALLEGE PARK REMAIL POSITION NAME OF SCHOOL COLLEGE PARK NAME OF SCHOOL COLLEGE PARK REMAIL POSITION NAME OF SCHOOL COLLEGE PARK REMAIL POSITION NAME OF SCHOOL NAME OF SCHOOL NAME OF REPRESENTATIVE MUCHCA PARK REMAIL POSITION NAME OF REPRESENTATIVE MUCHCA POSITION NAME OF REPRESENTATIVE MUCHCA POSITION NAME OF REPRESENTATIVE NAME OF REPRESENTATIVE NAME OF REPRESENTATIVE MUCHCA POSITION CITY PLASSABIL ZIP 94123 E-MAIL MILLER POSITION ADDRESS CITY ZIP POSITION ADDRESS CITY ZIP POSITION ADDRESS CITY ZIP POSITION ADDRESS PHONE FAX E-MAIL If the designated representative is not available for a given league meeting, an alternate designee of the district governing board may be sent in his/her place. NOTE: League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to	School District/Governing Board a	it its 5/8/24 meeting,
appointed the following individual(s) to serve for the 2024-2025 school year as the school's league representative: PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES NAME OF SCHOOL College Park NAME OF REPRESENTATIVE Levist (rith position Principal CITY Plassability zip 99723 E-MAIL Grithul@ malusd.org NAME OF SCHOOL College Park NAME OF REPRESENTATIVE Thereso Bahlman Position Attack Director CITY Plassability zip 94523 E-MAIL Buhlman To midusd, w E-MAIL Buhlman To midusd, w PHONE 97-1629-7630 # TAX B-MAIL POSITION NAME OF REPRESENTATIVE POSITION NAME OF REPRESENTATIVE POSITION NAME OF REPRESENTATIVE POSITION NAME OF SCHOOL NAME OF REPRESENTATIVE POSITION NAME OF REPRESENTATIVE POSITION NAME OF REPRESENTATIVE POSITION NAME OF REPRESENTATIVE POSITION TIP POSITION TIP THE designated representative is not available for a given league meeting, an alternate designee of the district governing board may be sent in his/her place. NOTE: League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to	to the first the same time board)	(5-11)
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	private schools must be designated representatives of the school age	
serve on the section and state governance bodies.	serve on the section and state governance bodies.	1/
Superintendent's or Principal's Name Kevin Hong Signature Signature 94523	Signal Andrew or Bringing's Name Kevin Hong Signa	ature
Superintendent's or Principal's Name	Superintendent's or Principal's Name	6.1
Address 201 VIVILLY Dr. City / TURSEN 117/ ZIB 17:00	Address 201 VIVII Dr. City/7	USIN 111/ ZID 1/12
Phone 927-682-9670 # 3200 FAX	Phone 927-682-9670 # 3200 FAX	

PLEASE RETURN THIS FORM DIRECTLY TO THE CIF SECTION OFFICE.

Please complete the form below for each school under your jurisdiction and RETURN TO THE CIF SECTION				
OFFICE no later than June 28, 2024.				
Mount Diablo Unified School District School District/Governing Board at its (Name of school district/governing board) appointed the following individual(s) to serve for the 2024-2025 school year as the school's league representative:				
PHOTOCOPY THIS FORM TO LIST ADDITION	NAL SCHOOL REPRESENTATIVES			
NAME OF SCHOOL Concord High School				
NAME OF REPRESENTATIVE Julene MacKinnon	POSITION Principal			
ADDRESS 4200 Concord Blvd	CITY Concord ZIP 94521			
PHONE 925-687-2030 x.3300 FAX 925-682-4613	E-MAIL mackinnonj@mdusd.org			
****************	**********			
NAME OF SCHOOL Concord High School				
NAME OF REPRESENTATIVE Matt Harrod	POSITION Athletic Director			
ADDRESS 4200 Concord Blvd	CITY Concord ZIP 94521			
PHONE 925-687-2030 x.3300 FAX 925-682-4613	E-MAIL harrodm@mdusd.org			
****************	*********			
NAME OF SCHOOL				
NAME OF REPRESENTATIVE	POSITION			
ADDRESS	CITY ZIP			
PHONE FAX	E-MAIL			
*****************	*********			
NAME OF SCHOOL				
NAME OF REPRESENTATIVE	POSITION			
ADDRESS	CITY ZIP			
PHONE FAX	E-MAIL			
If the designated representative is not available for a given <u>league</u> meeting, an alternate designee of the district governing board may be sent in his/her place. NOTE : League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to serve on the section and state governance bodies.				
Superintendent's or Principal's Name Julene MacKinno Address 4200 Concord Blvd	n Signature A Signature City Concord Zip 94521			
Phone 925-687-2030 x.3300 FAX	925-682-4613			

PLEASE RETURN THIS FORM DIRECTLY TO THE <u>CIF SECTION OFFICE</u>.

Please complete the form below for each school under your jurisdiction and RETURN TO THE CIF SECTION

OFFICE no later than June 28, 2024.				
MT. Qiablo High School School District/Governing Board at its MAY 8. 202 (Name of school district/governing board)				
appointed the following individual(s) to serve for the 2024-20	25 school year as the school's league			
representative:				
PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES				
NAME OF SCHOOL MT. Quablo High Scho	ol			
NAME OF REPRESENTATIVE RONNIE MORE	POSITION Athletic Vairector			
ADDRESS 2450 Grant Street	CITY Concord ZIP 94520			
PHONE 213-604-3949 FAX	E-MAIL mageer omdusdiorg			
****************	*************			
NAME OF SCHOOL MT. Quyo High School				
NAME OF REPRESENTATIVE Maru. Yavi'S	POSITION Athletic Director			
ADDRESS 2450 Front Street	CITY Concord ZIP 94520			
PHONE 404-536-3784 FAX	E-MAIL Davis MKD modusel. org			
***********	**********			
NAME OF SCHOOL MT. Dig blo High School	4 4 4			
NAME OF REPRESENTATIVE Kyan Murrow	POSITION U.P. Athletic			
ADDRESS 2450 Grand Street	CITY Concord ZIP 94520			
PHONE \$13-520-6138 FAX	E-MAIL MURROWROM dusdors			
******************	************			
NAME OF SCHOOL				
NAME OF REPRESENTATIVE	POSITION			
ADDRESS	CITY ZIP			
PHONE FAX	E-MAIL			
If the designated representative is not available for a given league meeting, an alternate designee of the district governing board may be sent in his/her place. NOTE: League representatives from public schools and private schools must be designated representatives of the school's governing boards in order to be eligible to serve on the section and state governance bodies. Superintendent's or Principal's Name Mar kell Me Cain Signature Address 2460 Grant St. City Longold, Ca. Zip 94520				
Phone 935-682-4030 FAX				

PLEASE RETURN THIS FORM DIRECTLY TO THE CIF SECTION OFFICE.