



# Old Spice Red Zone Player of the Year Renewal Form



**Yes! Please Enroll My High School in the 2009 Old Spice Red Zone Player of the Year Program. I Agree to:**

- Distribute the Samples to my Football Players According to the Program Guidelines.
- Nominate a Player of the Year by the December 1, 2009 Deadline

**PLEASE PRINT CLEARLY**

Coach Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Coach Email Address: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_  
High School Name: \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_  
HS Street Address (no PO boxes): \_\_\_\_\_ When is your first 2009 game (est.)? \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_ # Years Coaching: \_\_\_\_\_  
Team/Mascot Name: \_\_\_\_\_ School Colors: \_\_\_\_\_

**We realize you are very busy during football season.  
Is there a secondary contact (an assistant) we should communicate with during the season?**

***If yes, who?*** Name \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**We will be sending out press releases for all nominees and national winners.  
Please provide us the contact information for your local media, as we will send out a press release for your 2006 nominee!**

Local Newspaper Name: \_\_\_\_\_ Local Sportswriter's Name: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_