

Lezzer Lumber Classic Player Packet

DUE DATE:

February 28, 2023 or sooner

Page 1 -Congratulations Letter

Page 2 -Checklist (You may keep page 1 & 2)

February 28, 2023 or sooner

Page 4&5 -Agreement and Acceptance of Invitation
-Player Consent and Release

**Just return page 4 & 5 to Larry Wiser (NORTH) or Tom Shearer (SOUTH)
with Physical Papers from the Athletic Trainer.....plus 6, 7,8 and 9.**

April 15, 2023

Page 5 -Player Information/ PRESS RELEASE

Page 6&7 -DRAYER Medical Release Form
(this form goes to Head Trainer for completion
and attach the Physical papers)

Page 8 & 9 -Medical and Insurance

RED PAGES are to be DELIVERED to Larry W. or Tom S.

Page 10 & 11 -Sponsor and Booster Club Program ad Page
(*** Page 10 can be delayed a couple of weeks if other pages are submitted***)

Page 12 -Custom Business Advertising Form

-This page may be of interest to some parents---

Page 13 -Parent Patron Ad or Business Card Form

Page 14- Pre-Order Sales, Fan Advertising, DVD Order

Central Pennsylvania Football Coaches Association

(Pg. 1)

39TH LEZZER LUMBER FOOTBALL CLASSIC

Larry Wisner, North Game Director
164 Westwood Dr.
Clarion, PA 16214
Cell: 814-758-1300
Email: lwiser72@gmail.com

Tom Shearer, South Game Director
211 Betty Circle
Reedsville, PA 17084
Cell: 717 250- 1535
EMail: shearertom70@gmail.com

February 16, 2023

Dear Classic Player:

Sincere congratulations from the Central Pennsylvania Football Coaches' Association for being selected to play in the **Thirty-ninth Annual Lezzer Lumber Football Classic**. As a graduate, you will have an opportunity to practice and play one more high school football game. This time, many of your teammates will be former opponents.

The game is set to be played **Sunday, June 11th, 2023 @ Tyrone Memorial Field.**

Practices will begin **"around"** May 30 (meet & greet) through June 10th, 2023. The Head Coach of your squad will pin down exact dates later**NORTH**, Spank Trexler **SOUTH**, Aaron Batzel. Since you will be out of school, your practice times may possibly be in the evenings the week before. Don't let missing a practice or two keep you from playing in this game.

You will need to make arrangements to borrow equipment from your high school coach, and secure the following pieces of equipment which are not provided by the game:

| | | |
|-----------------|----------------------|-----------------|
| Helmet | Shoulder Pads | Girdle/Hip Pads |
| Knee/Thigh Pads | Practice Jersey | Practice Pants |
| Mouthpieces | Shoes (if available) | Socks |
| Supporter | Any Special Pads | Water Bottle |

1 Pair New **White or Gray** Pants to be used as game pants

Once again, congratulations on being selected to the **Lezzer Lumber Football Classic**. Please call or e-mail me if you have questions. We are looking forward to meeting you in preparation for the game. **Practice sites and times will be given to you in the April 2023. (North tentatively P-O / South tentatively Altoona)**

Sincerely yours, Larry Wisner & Tom Shearer, Co-Game Directors

Game Week Important Dates

| | |
|--------------------------------|---|
| June 4 or 5th | Orthopedic Physicals Submitted |
| June 4th or 5th | Video/Photographs during that Practice |
| 1 in late May, then June 5-10 | Practice Sessions (times determined later) |
| June 4 or 5th | Players receive Hats/T-Shirts/Tickets as ordered |
| June 11 th (Sunday) | Lezzer Football Classic Game @ TYRONE MEMORIAL HS Field |

REMEMBER: There is an ALTERNATE list of players that want to play in this game. If you can't play, then let us know immediately so we can fill your spot.

REQUIRED FORMS AND PROCEDURES

(Pg. 2)

Due Date

| | | |
|---|---|------------|
| | INTRO LETTER – Keep for your records | PAGE 1 |
| | CHECKLIST – Keep for your records | PAGE 2 |
| <input type="checkbox"/> February 28 | Agreement and Acceptance of Invitation | PAGE 4 |
| <input type="checkbox"/> February 28 | Parent Consent and <u>Release</u> | PAGE 4 |
| | | |
| <input type="checkbox"/> up to MARCH 30 th | Player Sponsor Form (<u>VERY IMPORTANT</u>) | PAGE 10 ** |
| | | |
| These pages DUE APRIL 15rd | | |
| <input type="checkbox"/> up to April 15 th | Player Information/ PRESS RELEASE | PAGE 5 |
| <input type="checkbox"/> up to April 15 th | DRAYER <u>Release Form</u> | PAGE 6 |
| <input type="checkbox"/> up to April 15 th | Drayer Concussion Instructional Sheet | PAGE 7 |
| | Give these signed RELEASE forms (Pg 6 &7) to your high school Trainer so they can attach them to your Physical papers. | |
| <input type="checkbox"/> up to April 15 th | Player Medical History | PAGE 8 A&B |
| <input type="checkbox"/> up to April 15 th | Insurance Information | PAGE 9 |
| <input type="checkbox"/> up to April 15 th | Booster Club Advertising Form | PAGE 11 |
| <input type="checkbox"/> up to April 15 th | Optional: Custom Business Advertising—Form | PAGE 12 |
| <input type="checkbox"/> up to April 15 th | Optional: Parents Patron OPPORTUNITY | PAGE 13 |
| | | |
| <input type="checkbox"/> up to MAY 15 th | Optional: Pre-Sales / Optional Items / DVD Orders | PAGE 14 |

******If two players want the same number, the player returning all forms of PACKET #1 quickest will be given FIRST choice of his game jersey number.**

Each player is expected to have all forms (pg. 4, 5, 6, 7, 8A&B, 9, 10, and 11) submitted by APRIL 15th (the **HARD DEADLINE**) . If a player does not have the required forms, he will be given a one week notice to complete all forms. If the required forms are not returned, the player will be dropped from the Lezzer Football Classic roster and the coach will then go to his ALTERNATES list.

If, at any time, a Player decides not to participate in the Classic, it is the responsibility of the player to notify the Game Director or the All-Star Head Coach as soon as possible. **If the player drops out of the Classic on or after April 15th, the sponsor fee will not be refundable and it will be the parent's responsibility to pay/reimburse the sponsor's \$150 sponsorship fee.**

IMPORTANT: Corporate Sponsor (\$150) **PAGE 10** can be delayed a couple weeks as long as the pages (5, 6, 7, 8A&B, 9) are completed **by APRIL 15th**. We realize getting a sponsor doesn't happen overnight. At least get the other pages sent to North: Larry Wisner or South: Tom Shearer.

DON'T worry about the check if it's late--- just get your papers submitted!!
Be thinking about it NOW -----this money is the backbone of our game.

Due Date- February 15th

Return to:

| | | | | | |
|--------------|------------------|----------------------|--------------|---------------|--|
| Tom Shearer | 211 Betty Circle | Reedsville, PA 17084 | 717-667-6915 | 717 250- 1535 | shearertom70@gmail.com |
| Larry Wisner | 164 Westwood Dr. | Clarion, PA 16214 | 758-1300 | 814-758-1300 | Lwisner72@gmail.com |

LEZZER LUMBER FOOTBALL CLASSIC

PLAYER FACT SHEET

(Pg. 3)

Equipment- You will need to make arrangements with **your high school coach** to get the following pieces of equipment:

| | | |
|-----------------|---------------------|------------------------|
| Helmet | Shoulder Pads | Girdle/Hip Pads |
| Knee/Thigh Pads | Practice Jersey | Practice Pants |
| Mouthpieces | Shoes (Field Grass) | 1 Pair New White Pants |

*Be sure to arrange for return of this equipment before the football season

Personal Items (you provide) - socks/athletic supporter/practice T-shirts, water bottle and shorts. You will be practicing two sessions most days.

Pictures will be taken Monday or Tuesday, June 5 or 6th (see schedule below) - Game Jersey, (2) complimentary Game Tickets, and complimentary T-Shirt will be given to you on picture day.

Physical Conditioning -- Please report to practice in good physical condition. Not only is it risky for you not to be in “shape”, but it would be unfair to your teammates and coaches.

Shoes- The game will be played **at TYRONE MEMORIAL HS.** The stadium has a “Natural Grass” --
If you cannot be present for team orthopedic evaluation on the first day of practice, you must report to the Athletic Trainer prior to your first practice session. If you miss pictures –chances are “slim” that we can replace it!

Practice Dates/Sites

North- June 4th to June 10, 2023

Practice Site: Clearfield

Sunday, June 11 -- GAME Times TBA

South- June 4th to June 10, 2023

Practice Site : Hollidaysburg HS

Sunday, June 11 – GAME Times TBA

Pictures – June 4 or 5th, 2023

Break meals will be provided

Pictures – June 4 or 5th, 2023

Break meals will be provided

Coaches

North

Head Coach

NORTH – Jimmy Thompson

Cell # 814- 762-3158

Email address – jthompson@curwensville.org

South

Head Coach

SOUTH- Aaron Batzel

Cell # 814-979-5030

Email address: aaronjbatzel@gmail.com

Questions or Concerns:

Game Director:

| | | | | | |
|--------------|------------------|----------------------|--------------|---------------|--|
| Tom Shearer | 211 Betty Circle | Reedsville, PA 17084 | 717-667-6915 | 717 250- 1535 | shearertom70@gmail.com |
| Larry Wisner | 164 Westwood Dr. | Clarion, PA 16214 | 758-1300 | 814-758-1300 | Lwisner72@gmail.com |

GAME TIME & SITE: Sunday, June 11, 2023 at TYRONE MEMORIAL (time TBD)

Lezzer Lumber Football Classic

Agreement and Acceptance of Invitation to Participate

I agree to report for and follow the practice schedule, participate in all activities, and follow all regulations which may be established by the organizers and consultants of the game. Further, I will exercise care in the pursuit of good safety and health practices in all activities involving the game and practices.

It is understood that football is a violent physical activity. I hereby release the Central Pennsylvania Football Coaches Association, all game sponsors, and the game consultants from all liability for injuries or losses of any kind which may occur in connection with my participation in the Lezzer Lumber Football Classic, directly and/or indirectly. This includes any travel associated with said contest, and any losses of any kind which may result from any act or omission of the Central Pennsylvania Football Coaches Association, the game sponsors, and the game consultants.

Dated _____

Participant's Signature

Parental Consent and Release

We are aware that our son has been selected to play in the Lezzer Lumber Football Classic. We consent to his Participation, and in consideration for the invitation and the benefits provided to him, release the Central Pennsylvania Football Coaches Association, the game sponsors, the coaches, and the game consultants from all liability or losses of any kind which he might sustain as a result of any activities in which he participates in connection with the game. This includes transportation to and from practices and games, any injuries incurred in any practice, in or on the facilities provided during the week of said practices, or injuries incurred during the game regardless of whether the injury or loss resulted from any act or omission of the Central Pennsylvania Football Coaches Association, game sponsors, the coaches, or the game consultants. *If the player drops out of the Classic on or after April 20th, the sponsorship fee becomes non-refundable and it becomes the parent's responsibility to reimburse the sponsor's \$150 fee.*

Dated _____

Parent or Guardian

Parent or Guardian

DUE DATE: February 15, 2022

Return to:

| | | | | | |
|--------------|------------------|----------------------|--------------|---------------|--|
| Tom Shearer | 211 Betty Circle | Reedsville, PA 17084 | 717-667-6915 | 717 250- 1535 | tshearer70@gmail.com |
| Larry Wisner | 164 Westwood Dr. | Clarion, PA 16214 | 758-1300 | 814-758-1300 | Lwisner72@gmail.com |

DUE DATE – FEBRUARY 28, 2023

PLAYER INFORMATION / CLASSIC

FOR PRESS RELEASE

Please provide the following information so we may use it for the compile lists and press releases as necessary for the Classic. Don't be shy, as we are proud of the athletes representing their schools in the Classic.

Player's Name _____

School _____

Parent/Guardian Name _____

Phone -Parents _____

Cell _____

Players Cell _____

Size to Order by Player: Game Jersey _____ **T-Shirt** _____

PREFERRED GAME JERSEY NUMBER 1st CHOICE _____ 2nd CHOICE _____ 3rd _____

PARENT EMAIL ADDRESS _____ **(PRINT)**

PLAYER EMAIL ADDRESS _____ **(PRINT)**

Future Plans: List College / Trade School _____

Area of Study

Armed Services – Branch

Work – Type of Work)

CONCUSSION INSTRUCTIONAL SHEET

A concussion is a bump, blow or jolt to the head or body in which the brain moves quickly back and forth inside the skull causing a “mild” traumatic brain injury.

SIGNS & SYMPTOMS _____

COGNITIVE (THINKING/REMEMBERING): Difficulty concentrating, difficulty remembering, confusion, feeling slowed down, feeling “in a fog”

PHYSICAL: Headache, nausea or vomiting, dizziness, blurred vision, neck pain, fatigue or low energy, sensitivity to light or noise, balance problems

EMOTIONAL: Irritable, sadness, emotional instability, nervous or anxious

SLEEP: Sleeping less or more than usual, drowsiness, trouble falling asleep

WHAT SHOULD I DO? _____

- » Remove the athlete from play immediately and seek medical attention
- » Never return to sports or recreational activities on the same day the injury occurred
- » Seek guidance from a healthcare professional experienced and trained in the evaluation and management of concussions to guide a step-based return to activities progression including work, school and play.
- » Take time to get better - The brain needs time to heal. Limit activities involving physical and cognitive exertion, such as watching TV, video games, working on computer, texting, driving a car and exercise. Such activities can cause the signs and symptoms of a concussion to worsen or prolong the healing process. These activities should be carefully managed and monitored by a health care professional.
- » Make sure that a concussion is reported. Repeat concussions in young athletes can result in more traumatic injuries involving increased swelling or permanent damage to the brain.

If the following symptoms worsen or develop, please contact your doctor or the nearest hospital emergency department *immediately*.

- | | | |
|--|--|--|
| » Drowsy and cannot be awakened | » Worsening headache | » Inability to recognize people or places |
| » Weakness, numbness or decreased coordination | » Repeat vomiting or nausea | » Loss of or fluctuating level of consciousness |
| » Pupils becoming unequal in size | » Convulsions or seizures | » Increasing irritability, agitation, unusual behavior |
| » Increasing confusion, restless | » Slurred speech or inability to speak | |

DO NOT: _____

- » Drink alcohol
- » Use prescription or OTC drugs without medical supervision
- » Drive a car or operate machinery
- » Engage in physical activity that makes symptoms worse
(eg. exercise, weight lifting, sports)
- » Engage in mental activity that makes symptoms worse
(eg. TV, video games, texting)

IT IS OK TO: _____

- » Use ice packs on head and neck as needed for comfort
- » Eat a carbohydrate-rich diet
- » Go to sleep
- » Rest (no strenuous mental or physical activity)

IF YOU HAVE QUESTIONS OR CONCERNS, PLEASE CONTACT YOUR ATHLETIC TRAINER.

ATHLETIC TRAINER: _____

CONTACT: _____

I acknowledge that ATC reviewed management of signs and symptoms for concussions and received the concussion instructional sheet.

PRE-PARTICIPATION HISTORY AND PHYSICAL EVALUATION

(Accurate completion helps our trainer to be prepared for treating your son)

PLAYER'S NAME _____

(First Name, MI, Last Name)

MEDICAL HISTORY

Chronic Illness (Diabetes, Asthma, Other)

Seasonal or Food Allergies or other known allergies (bee sting or other insects)

Current Medications (Please List)

Chronic Injuries/ Surgeries/ Fractures etc.

Heart Problems/ Seizures/ Blood Pressure or other Medical Problems

Family History (Stroke/ Heart Attack/ Heart Disease)

Date of Last Tetanus Shot

Date of Last Measles Immunization

Explain "YES" Answers

- | | | | |
|----------|--|----------|----------|
| 1 | Have you ever been Hospitalized? | Y | N |
| | Have you ever had surgery? | Y | N |
| 2 | Have you ever passed out during or after exercise? | Y | N |
| | Have you ever had chest pains during or after exercise? | Y | N |
| | Have you ever been dizzy during or after exercise? | Y | N |
| | Do you tier more quickly than your friends during exercise | Y | N |
| | Have you ever had high blood pressure? | Y | N |
| | Have you ever been told you had a heart murmur? | Y | N |
| | Have you ever had racing of your heart or skipped heart beats? | Y | N |
| | Has anyone in your family died from heart problems or a sudden death before age 50? | Y | N |
| 3 | Do you have any skin problems (itching, rashes, acne)? | Y | N |
| 4 | Have you ever had a head injury? | Y | N |
| | Have you ever been knocked out or unconscious? | Y | N |
| | Have you ever had seizures? | Y | N |
| | Have you ever had a stinger, burner, or pinched nerve? | Y | N |
| 5 | Have you ever had heat or muscle cramps? | Y | N |
| | Have you ever been dizzy or passed out in the heat? | Y | N |
| 6 | Do you have trouble breathing or cough during or after activity? | Y | N |
| 7 | Do you us any special equipment (pads, braces, neck rolls, etc.)? | Y | N |
| 8 | Have you had any problems with your eyes or vision? | Y | N |

Do you wear glasses or contacts or protective eye wear? Y N

9 Have you ever sprained/ strains, dislocated, fractured, broken or had repeated swelling or other injures of any bones or joints? Y N

Please Check all that Apply

- Head Shoulder Thigh Neck Elbow
Chest Forearm Shin/ Calf Back Wrist
Ankle Hip Knee Hand Foot

10 Have you had any medical problems (infectious mononucleosis, diabetes, etc.)? Y N

11 Have you had any Medical problems or injuries since your last school/ sports or medical evaluation? Y N

Explain "YES" answers:

Three horizontal lines for writing an explanation.

Table with 1 row and 1 column containing the LEZZER LUMBER CONCUSSION PROTOCOL text.

We Hereby State that, to the best of our knowledge, the answers to the above are correct and accurate.

Signature of Player

Signature of Parent

Date

DUE DATE: FEBRUARY 28, 2023

Send to:

Table with 2 rows and 6 columns containing contact information for Tom Shearer and Larry Wisner.

Your Sponsor Page

Every Player Needs to Procure a \$150 Sponsor

Each year, we ask players selected to the Classic to find a Business “sponsor” for the game program. The sponsor ad is a **one line** (23 characters) **recognition with your picture in the game program**. Since most people will look at the player pictures often, it is the best ad in the program!

Should you have difficulty finding a sponsor, check with your coach for assistance. **Some players find multiple sponsors which can still add up to \$150.** This is a critical part of our program preparation, so please start to work on it.

IMPORTANT! Please read on this PACKET’s cover page about your two pictures to be emailed to Mr. Irwin (Senior Picture and one in football uniform). Rob’s email is: rirwin3@comcast.net

Player Sponsor Forms -- Due MARCH 30, 2023

Players Name _____

Player’s Parent(s) Name _____
(To be listed in the Game Program)

Sponsor’s Name _____ Phone _____

Sponsor’s Address _____
STREET Town, State Zip

Sponsor’s Email Address _____

Sponsor’s one line identification (Name of Business) exactly as desired in the program.
(Please Print – Limit 23 characters per line)

PLAYER SPONSORSHIP COST \$150.00 ck # _____ Check for \$ _____ enclosed
(Payment Due March 1st)

***** NEED HELP:** If you can’t find a sponsor for \$150, get two sponsors for \$75.....**these sponsors are the ‘backbone’ of the game.**

***** Make Check payable to: Central Pennsylvania Football Coaches Association (CPFCA)**
***** Each Player Sponsor will receive 5 Complimentary Tickets and a coupon for a Game Program.**

Please return this order to: Rob Irwin – PO Box 1125, LEMONT, PA 16851

***OPTIONAL**

C.P.F.C.A.

**Lezzer Lumber Football Classic -- Parent/Fan Advertising Form
DUE APRIL 15, 2023**

BUSINESS CARD ADS: \$40

Reproduction of business card in Game Program --Plus 3 General Admission Tickets & 1 Game Program

PATRON ADS: \$25

Listing as patron in Game Program --Plus 2 General Admission Tickets & 1 Game Program

_____ Business Card Ad -- \$40 Business Card enclosed: Yes No

_____ Patron Ad -- \$25

Patron Listing:

(Space is limited to box)

Contact Person _____

Address _____

City _____

Zip _____

Phone _____

Mail Advertising form to: Rob Irwin, PO Box 1125, Lemont, PA 16851

***OPTIONAL**

LEZZER LUMBER CLASSIC

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PRE-SALE ORDER FORM / OPTIONAL ITEMS

[This page **can be** submitted **anytime** before **May 25, 2023**]

_____ (PLAYER)
*****TICKETS PRE-SALE - \$6.00** GAME DAY - \$8.00 **TOTALS**
(in addition to the 2 complimentary tickets)
 _____ @ \$6.00 **TICKET TOTALS** _____

*****T-SHIRTS** **PRE-SALE - \$12.00** GAME DAY- \$14.00
 _____ (SIZES _____) @ \$12.00 _____
 _____ (SIZES _____) @ \$12.00 _____
 _____ (SIZES _____) @ \$12.00 _____
T-SHIRT TOTAL _____

*****HATS** (Standard: Lezzer Football Logo only)
PRE-SALE - \$15.00 GAME DAY - \$20.00
 NAVY (North) _____ RED (South) _____ @ \$15.00
HAT TOTAL _____

Personalized Hat:

NAVY (North) _____ RED (South) _____
 + Name _____ @ \$2.00 + Name _____ @ \$2.00
 + Number _____ @ \$2.00 + Number _____ @ \$2.00

HAT Accessories TOTAL _____

*****COACHING (Polo) SHIRTS**
PRE-SALE - \$45.00 GAME - \$45.00
 WHITE w Navy insert (North) White w Red insert (South)
 _____ (SIZES _____) @ \$45.00 _____
 _____ (SIZES _____) @ \$45.00 _____
 _____ (SIZES _____) @ \$45.00 _____
SHIRT TOTAL _____

LEZZER LUMBER CLASSIC

DVD ORDER FORM

DVD = \$30

DVD copies of the Lezzer Lumber Football Classic will be available. The full color video has been a great memento in the past. DVD should be distributed by August 1 for all orders received before July 20. DVD includes player introductions, pictures of players, 100's of game action pictures, half-time and post-game ceremonies, and video of game.

Please include a check payable to CPFCA. **(\$30.00)**

NAME: _____

ADDRESS: _____

PLEASE MAKE CHECKS PAYABLE TO **CPFCA**

GRAND TOTAL _____

Please return this order to: Rob Irwin – PO Box 1125, LEMONT, PA 16851