

### 2018-2019 Designation of CIF Representatives to League

Please complete the form below for each school under your jurisdiction and **RETURN TO THE CIF SECTION OFFICE (ADDRESSES ON REVERSE SIDE) no later than June 29, 2018.**

West Contra Costa Unified School District School District/Governing Board at its \_\_\_\_\_ meeting,  
(Name of school district/governing board) (Date)  
appointed the following individual(s) to serve for the 2018-2019 school year as the school's league representative:

#### **PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES**

NAME OF SCHOOL De Anza High School  
NAME OF REPRESENTATIVE Summerlyn Sigler POSITION Principal  
ADDRESS 5000 Valley View Rd. CITY Richmond ZIP 94803  
PHONE 510.231.1440 FAX 510.223.7984 E-MAIL ssigler@wccusd.net

\*\*\*\*\*

NAME OF SCHOOL De Anza High School  
NAME OF REPRESENTATIVE Lawrence Smith POSITION Athletic Director  
ADDRESS 5000 Valley View Rd. CITY Richmond ZIP 94803  
PHONE 510.231.1440 FAX 510.223.7984 E-MAIL lsmith@wccusd.net

\*\*\*\*\*

NAME OF SCHOOL El Cerrito High School  
NAME OF REPRESENTATIVE Edith Jordan -McCormick POSITION Principal  
ADDRESS 540 Ashbury Ave. CITY El Cerrito ZIP 94530  
PHONE 510.231.1437 FAX 510.525.1810 E-MAIL edith.jordan-mccormick@wccusd.net

\*\*\*\*\*

NAME OF SCHOOL El Cerrito High School  
NAME OF REPRESENTATIVE Jacob Rincon POSITION Athletic Director  
ADDRESS 540 Ashbury Ave. CITY El Cerrito ZIP 94530  
PHONE 510.231.1437 FAX 510.525.1810 E-MAIL Jacob.rincon@wccusd.net

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 Matthew Duffy Signature \_\_\_\_\_  
Address 1108 Bissell Ave City Richmond Zip 94804  
Phone 510.231.1100 Fax \_\_\_\_\_

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CIF SECTION OFFICE.  
SEE REVERSE SIDE FOR CIF SECTION OFFICE ADDRESSES.**

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#### **PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES**

NAME OF SCHOOL Hercules High School  
NAME OF REPRESENTATIVE Paul Mansingh POSITION Principal  
ADDRESS 1900 Refugio Valley Rd. CITY Hercules ZIP 94547  
PHONE 510.231.1429 FAX 510.254.1089 E-MAIL pmansingh@wwcusd.net

\*\*\*\*\*

NAME OF SCHOOL Hercules High School  
NAME OF REPRESENTATIVE Dean Grecco POSITION Athletic Director  
ADDRESS 1900 Refugio Valley Rd. CITY Hercules ZIP 94547  
PHONE 510.231.1429 FAX 510.1089 E-MAIL deangrecco@wccusd.net

\*\*\*\*\*

NAME OF SCHOOL Kennedy High School  
NAME OF REPRESENTATIVE Philip Johnson POSITION Principal  
ADDRESS 4300 Cutting Blvd. CITY Richmond ZIP 94804  
PHONE 510.231.1433 FAX 510.235.1915 E-MAIL pjohnson1@wccusd.net

\*\*\*\*\*

NAME OF SCHOOL Kennedy High School  
NAME OF REPRESENTATIVE Carl Sumler POSITION Athletic Director  
ADDRESS 4300 Cutting Blvd. CITY Richmond ZIP 94804  
PHONE 510.231.1433 FAX 510.235.1915 E-MAIL carl.sumler@wccusd.net

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 Matthew Duffy Signature \_\_\_\_\_  
Address 1108 Bissell Ave City Richmond Zip 94804  
Phone 510.231.1100 Fax \_\_\_\_\_

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#### **PHOTOCOPY THIS FORM TO LIST ADDITIONAL SCHOOL REPRESENTATIVES**

NAME OF SCHOOL Pinole Valley High School  
NAME OF REPRESENTATIVE Kibby Kleiman POSITION Principal  
ADDRESS 2900 Pinole Valley Rd. CITY Pinole ZIP 94564  
PHONE 510.231.1442 FAX 510.758.6054 E-MAIL kkleiman@wccusd.net  
\*\*\*\*\*

NAME OF SCHOOL Pinole Valley High School  
NAME OF REPRESENTATIVE Tiffany Valdehueza-Goode POSITION Athletic Director  
ADDRESS 2900 Pinole Valley Rd. CITY Pinole ZIP 94564  
PHONE 510.231.1442 FAX 510.758.6054 E-MAIL tvaldehueza@wccusd.net  
\*\*\*\*\*

NAME OF SCHOOL Richmond High School  
NAME OF REPRESENTATIVE Jose De Leon POSITION Principal  
ADDRESS 1250 23rd. St. CITY Richmond ZIP 94804  
PHONE 510.231.1450 FAX 510.235.0316 E-MAIL jdeleon@wccusd.net  
\*\*\*\*\*

NAME OF SCHOOL Richmond High School  
NAME OF REPRESENTATIVE Deryk Hudson POSITION Athletic Director  
ADDRESS 1250 23rd. St. CITY Richmond ZIP 94804  
PHONE 510.231.1450 FAX 510.235.0316 E-MAIL deryk.hudson@wccusd.net

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 Matthew Duffy Signature  
Address 1108 Bissell Ave City Richmond Zip 94804  
Phone 510.231.1100 Fax

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