



Basketball Coaches Association of New York, Inc.

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Basketball Coaches Association of New York, Inc. Best of BCANY Top 50 Nomination Form

Player's Name: _____

School: _____

Grade: (circle one) 7 8 9 10 11 12 Section: _____

Position: (circle one) Guard G/F Forward F/C Center

Class (circle one) AA A B C D

Coach's Name: _____

Coach's Email: _____

Contact number: _____

Season Statistics- Please fill in all categories

Total Points	PPG Avg	FG Made	FG %	3FG Mad	3FG %	FT Made	FT %

Assist	APG %	Rebounds	RPG %	Steals	SPG %	Blocks	BPG %

Awards won this Season	Player Milestones this season

Best Game of Season Detail	Championships won this Season

Coach's Comments:

Please return to _____ by _____