



TO: Football Coaches and Principals participating in the TSSAA Quarterfinals

FROM: Shonnie Speicher, Executive Coordinator

SUBJECT: BlueCross Bowl Program

Congratulations for advancing to the TSSAA Football Quarterfinals! Schools will submit their information for the BlueCross Bowl program via the TSSAA Portal. The post-season entry form is now available to all school administrators and needs to be submitted by **November 24, 2025**. Locate the form in the athletic director's portal account by clicking Forms, New Form, Postseason Entry Form, then Football.

When you submit your school's form via the Portal, we will have immediate access to your team's information. You should not mail/fax/email your team roster, photo, depth chart, cheerleading photo and roster, or logo to our office.

Prior to completing the Post Season Entry Form, schools need to submit their team roster details with player number, player name, position, height, weight, and grade through the TSSAA Portal. Coaches, SID's, and Athletic Directors are permitted to enter roster details. Following are the instructions for submitting your roster:

1. Sign into your TSSAA Portal Account.
2. Click on Sports.
3. Click on Rosters & Schedules.
4. Click on the Roster Details button across from Football.
5. As you submit the requested information, we recommend you periodically hit the Save Changes button so you are not timed out of the system

In addition to the roster, the following will also be required to submit with the form:

- **FOOTBALL TEAM PHOTO** (Must be JPEG format and 900 pixels wide or larger.)
- **DEPTH CHART** (You will need to fill out the form provided and upload the file when submitting the form.)
- **CHEERLEADING PHOTO & ROSTER** (The photo must be JPEG format and 900 pixels wide or larger. Please use the roster form provided and upload the file when submitting the form.)
- **SCHOOL LOGO** (Your logo must be in JPEG, PNG or GIF format and at least 900x900 pixels. Maximum file size is 3MB.)

Complete the form by verifying school profile and coaches' information, as well as providing the requested program information. We are also requesting emergency contact information for your team in case of weather or safety emergencies. **Correct any information BEFORE submitting the form.** All information shown (except the school's name) can be changed by the school administrator.

The form must be submitted by a Portal user assigned as Athletic Director, Athletic Secretary, Principal, Headmaster, or System Athletic Director. Upon completion, the completed form will be emailed to the school's athletic director and head coach.

We wish you the best of luck with the remainder of the season! Please remember to submit your post season entry form by **November 24, 2025**. If you have any questions or comments, please don't hesitate to contact Shonnie Speicher at tssaa@tssaa.org.



DEPTH CHART

School Name: _____

OFFENSE

Position	#	Name

Position	#	Name

DEFENSE

Position	#	Name

Position	#	Name

SPECIAL TEAMS

Position	#	Name

Position	#	Name

CHEERLEADING ROSTER

SCHOOL: _____

Row 1 (From L to R): _____

Row 2 (From L to R): _____

Row 3 (From L to R): _____

Row 4 (From L to R): _____
