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|  | | | | **T.H.S.W.P.A.** | | | | | | click above line and type | |
|  | | | | ***Regional and State Meet Eligibility Form*** | | | | | |
|  | |  | | | | | | | | |
| Date | |  | | | | | | | | |
| Name of School | | | | | |  | | | | |
| School Address | | | | |  | | | | | |
| City | |  | | | | | | Zip Code |  | |
| Phone | | |  | | | | | | | |
|  | | | | | | | | | | |
| ***I hereby certify that the following lists of students are eligible according to the rules as stated in the U.I.L. constitution and contest rules.*** | | | | | | | | | | |
| 1. |  | | | | | | | | | |
| 2. |  | | | | | | | | | |
| 3. |  | | | | | | | | | |
| 4. |  | | | | | | | | | |
| 5. |  | | | | | | | | | |
| 6. |  | | | | | | | | | |
| 7. |  | | | | | | | | | |
| 8. |  | | | | | | | | | |
| 9. |  | | | | | | | | | |
| 10. |  | | | | | | | | | |
| 11. |  | | | | | | | | | |
| 12. |  | | | | | | | | | |
| 13. |  | | | | | | | | | |
| 14. |  | | | | | | | | | |
|  | | | | | | | | | | |
| *Signature of Superintendent or Principal* | | | | | | |  | | | |
|  | | | | | | | | | | |
| *Signature of Coach* | | | | | |  | | | | |