FORM 14B

MSHSAA STATE TENNIS INDIVIDUAL ENTRY FORM **GIRLS**

DO NOT SUBMIT THIS FORM UNTIL YOUR PLAYER(S) HAS QUALIFIED AT DISTRICT.

Classification (Circle One): 1 2 District Number: _____

School: _____ City: _____

Street Address: _____ Zip Code: _____

School Phone Number: _____ School Fax Number: _____

Coach's Name: _____ Coach's Home Phone Number: _____

SINGLES

Qualifiers' Name(s)

	First	Last	Grade	Place in district	Season Win-Loss Record*
1.					
2.					

DOUBLES TEAMS

1.					
2.					

(*) Do not leave this blank -- include all varsity matches through district play. Doubles records should be only with qualifying partner.

School's Eligibility Certification: I certify that the above listed students qualified at the individual district tournament held at ____ _____ and are eligible under the current eligibility requirements of the MSHSAA to represent this high school in the MSHSAA tennis state championships and meet all requirements in the MSHSAA Tennis Manual. (Make certain that no entry has violated the rules under By-Law 235, by competing in a nonschool-sponsored event).

Signed: _____ Date: _____
(Principal or Superintendent)

FAX this form to: MSHSAA State Tennis Entries
FAX: (573) 875-1450

DEADLINE FOR SUBMITTING THIS ENTRY FORM IS LISTED IN THE TABLE OF CONTENTS. SEE MSHSAA TENNIS MANUAL FOR FURTHER DETAILS.