

**MSHSAA GIRLS STATE GOLF CHAMPIONSHIPS ENTRY FORM**

**GIRLS**

Classification (Class 1, etc.) \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ School Phone: \_\_\_\_\_

School Fax: \_\_\_\_\_ Team Mascot: \_\_\_\_\_

Name of Coach: \_\_\_\_\_ Coach's Cell Phone Number: \_\_\_\_\_

Only teams and individual players that qualify at an MSHSAA district meet are eligible for MSHSAA Championship play. Additional alternates must be certified on the back of this form or on an attached eligibility roster. Substitutions for members of qualifying teams may be made up until the time of the tournament from the list of alternates who are certified eligible. No substitutes are permitted for an individual qualifier. Students not certified eligible by their principal may not be used as substitutes.

Please type or print legibly, using both the student's first and last names.

district Team Score for team qualifiers only ( $\pm$  Par) \_\_\_\_\_

**For qualifying teams, please list students in coach's order or preference.**

**For qualifying individuals, list only those students who qualified for the MSHSAA Championships.**

	QUALIFIERS' NAMES (First, Last)	Grade in School	district Score ( $\pm$ Par)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
Alternate 1.	_____	_____	_____
Alternate 2.	_____	_____	_____
Alternate 3.	_____	_____	_____
Alternate 4.	_____	_____	_____

**School's Eligibility Certification:** I certify that the above listed students are eligible under the current eligibility requirements of the MSHSAA to represent this high school in the MSHSAA state golf meet and meet all requirements in the MSHSAA Golf Manual.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Principal or Superintendent)

**FAX THIS FORM TO THE MSHSAA OFFICE AT (573) 875-1450 ON THE SAME DAY AS THE DISTRICT TOURNAMENT.**

**SEE MSHSAA GOLF MANUAL FOR FURTHER DETAILS.**