



Relay Entry Confirmation Sheet

School _____ Boys _____ Girls _____

Invitational _____ Division _____ Region _____ North/South _____ State _____

According to the National Federation Track & Field Rule 4-2-1, a competitor shall not compete in more than four events including relays. Before each relay a copy of this confirmation sheet must be given to the Clerk of the Course before participation at every track meet.

Entries

4 x 100 Meter Relay

1. _____
2. _____
3. _____
4. _____

4 x 200 Meter Relay

1. _____
2. _____
3. _____
4. _____

4 x 400 Meter Relay

1. _____
2. _____
3. _____
4. _____

4 x 800 Meter Relay

1. _____
2. _____
3. _____
4. _____

*This list becomes certified when the head coach signs and delivers this form to the Clerk of the Course. Any changes made during the meet **MUST** be updated on this form prior to the end of the meet!*

Signature of the Head Coach



Pole Vault Confirmation Sheet

Host School _____ Date of Meet _____

Invitational _____ Division _____ Region _____ North/South _____ State _____

According to the National Federation Track & Field Rule 7-4-5

It is the responsibility of the coach to verify that the vaulter will use a pole rated at or above the vaulter's weight and that legal poles have been provided for that competitor.

Each competition shall affirm by his/her signature that he/she will use the properly rated pole throughout the competition.

Vaulter's Name	Vaulter's Initials	Current Weight	Pole Rating	Coach's Signature
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This form must be presented to the event judge before vaulter is eligible to participate.

School _____

District _____ Division _____

Athletic Director _____

Principal _____

State Track Meet Roster

School _____ Coach _____

School Phone Number _____ Coach's Cell Number _____

Class – 1A 2A 3A 4A 5A 6A (circle one)

Players arriving separately from team or coach must be in full uniform or coach will need to identify participant at the gate.

Please print or type entire team in alphabetical order.

Boys (list *last* name first)

Girls (list *last* name first)

1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
16.	16.
17.	17.
18.	18.
19.	19.
20.	20.

Total number of athletes _____ X \$10.00 = \$ _____ total entry fee.

Please make copies of this form if necessary.

For the *State* Track Meet:
Make check payable to MHSAA
Mail this entry fee form and check to MHSAA, P. O. Box, Clinton, MS 39060
601-924-6400

MHSAA Office Use Only	
Check No. _____	Date _____
From _____	
P. O. No. _____	Date _____
Amount _____	
Date Deposited _____	