## IHSAA DISTRICT TENNIS ENTRY BLANK WEDNESDAY, MAY 9, 2018

(Rain date: Friday, May 11)

CLASS 2A

This completed entry blank must arrive at your district site no later than Monday, May 7. You may either email, fax or mail the entry blank to the District Manager. Be sure to retain a copy of the entry blank for your records. Information regarding district and state tennis can be found in the current IHSAA Handbook.

A complete list of district sites & assignments, as well as tournament managers and emails, are listed at http://www.iahsaa.org/tennis/district-and-substate-tennis-information/.

## EMAIL, FAX OR MAIL THIS ENTRY FORM TO YOUR DISTRICT MANAGER. EMAIL A COPY TO AMCNACE@IAHSAA.ORG

	High School wishes to enter the following	
tennis players in the District Tenr	nis Tournament.	
Signed:	Title:	
	Title:	
	SINGLES (Names & Grades)	
1		
	Grade	
	Grade <u>DOUBLES</u> (Names & Grades)	
1.		
	Grade	
	Grade	
2	Grade	
	Grade	
Printed or Typed Name of the Co	pach Accompanying Your Team	

Team/School	I Coach		
		TO THE DISTRICT T	
If your team should qualify for	sub-state tennis compe	etition, the line-up may be	e changed for that mee
but must always be in accorda			
Coaches Advisory Committee			
THE FIRST TEAM SCORES T scoring will be two out of the		g, 7-point set tie-break.	
Name	<u></u>		Grade
1			
2			
3			
4			
5			
6			
	<u>DOUBLES L</u>	.INE-UP	
Names & Grades: (Include s	ingles position # in pa	arentheses ( # ).	
Example: Joe Doe	11 (1)	John Jones	12 (4
1	()		(
	Grade		Grade
2	()		(
	Grade		Grade
3	()		(
	Grade		Grade
Name of Substitute(s):			Grade(s)
Note: It is recommended that tennis competition in the even listed, no substitute can be	t one of their regular pla	ayers becomes injured or	player to all team rill. <b>If no substitute is</b>
Name of High School Athletic D	Director (Typed or written	) confirming the above int	ormation is accurate

DISTRICT MANAGERS: PLEASE EMAIL OR FAX THE 2<sup>nd</sup> & 3<sup>rd</sup> PLACE TEAMS' PRELIMINARY SUB-STATE LINEUPS TO THE IHSAA ALONG WITH THE RESULTS FROM YOUR DISTRICT MEET.

FAX #: 515-432-2961 or AMCNACE@IAHSAA.ORG