

Statement of Eligibility and Supervision

School Name



Statement of Eligibility and Supervision

PAGE TWO: By signing below, we certify the following adults as the official point of contact for the weekend of the GFCA First/Second Year State Championship Tournament.

Adult Name			-
Adult Contact Number			
Any additional notes:			
Adult Name			-
Adult Contact Number			
Any additional notes:			
The principal should initial the following	:		
official coach and/or spor	nat my school will follow bylaw 4.13 on nsor must accompany their students to attending without a coach or sponsor	hroughout the duration o	
I understand and agree the (bylaw 2.40) in the GFCA	nat my school will conduct themselves Constitution	s according to the sportsm	nanship clause
	head coach's responsibility to notify above changes during the tournamer 242-2297.		
Principal's Signature	 Coach's Signature		