

## NCHSAA Declaration of Intent to Play Lacrosse 2014-2015

Please fax this information form by  $5:\!00$  PM, Tuesday, September 2nd, 2014

Fax #: 919-240-7398

Attn: Tra Waters, Director of Sports & Championships, NCHSAA

School:							High Scho	ol
Classificatio	n:	1A	2A	3A	4A	(Circle One	e)	
Team:	Male	/Fema	le/Bo	th (Cir	cle 0	ne)		
2013-2017 Alignment Conference:								
Principal's Signature:								
Athletic Director's Signature:								

- $\sim \,$  Use this form to declare your school's intention of participating in the 2014-2015 NCHSAA Lacrosse Program (Including Playoffs and Championships).
- $\sim\,$  By declaring, you are agreeing to abide by all rules and regulations put forth by the NCHSAA prior to, and during the 2014-2015 Lacrosse season.