

## Events for Men

School Name \_\_\_\_\_ Ph. (W) \_\_\_\_\_  
Coach's Name: \_\_\_\_\_ Ph. (C) \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Ph. (H) \_\_\_\_\_  
School Address: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

**Note: This form must be received by the NCHSAA no later than 3:00pm on Monday, Feb. 6, 2017. A \$50 late fee will be assessed for each individual entry. Checks must be made payable to the NCHSAA and in our office prior to the start of the State Championship meet. No entries after this will be accepted.**