

Send to: chiquana@nchsaa.org
Fax: 919-240-7399

City, State, Zip: _____

Regional: EAST MIDEAST MIDWEST WEST

[illegible]

Note: This form must be received by the NCHSAA no later than 3:00pm on Monday, October 25, 2021. There is a \$50.00 Late Registration Fee per individual entry. The check should be made payable to the NCHSAA, PO Box 3216, Chapel Hill, NC 27515 and must be in the NCHSAA office no later than the day before the Regional Meet.