



2018-2019 BOYS' SOCCER
DISTRICT CHAIRPERSON'S CERTIFICATION FORM

THIS FORM IS TO BE COMPLETED BY THE DISTRICT CHAIRPERSON FOR EACH DISTRICT AND
SUBMITTED TO THE LHSAA OFFICE BY THE DEADLINE DATE LISTED BELOW.

PLEASE FOLLOW THE INSTRUCTIONS BELOW
WHEN SUBMITTING THIS FORM:

1. Email this **completed** form to LHSAA Assistant Executive Director, Fallon Buckner @ fbuckner@lhsaa.org. It is the responsibility of the District Chairperson to confirm that this form has been received.
2. **This form must be received by January 29, 2019 before 10:00 P.M. (ALL DIVISIONS).**
3. By submitting this form, you certify that you are the District Chairperson and that all the information is correct.

DIVISION: _____ **DISTRICT:** _____ **DATE:** _____

SIGNATURE OF CHAIRPERSON: _____

PRINT NAME (CHAIRPERSON): _____

CHAIRPERSON'S SCHOOL: _____

HOME PHONE #: _____ **CELL PHONE #:** _____

<u>DISTRICT FINISH</u>	<u>SCHOOL</u>
1 ST	