

## KENTUCKY HIGH SCHOOL ATHLETIC ASSOCIATION REGIONAL CROSS COUNTRY OFFICIAL ENTRY BLANK

(make additional copies if necessary)

## TO BE USED ONLY WHEN IT IS IMPOSSIBLE TO SUBMIT ENTRIES ELECTRONICALLY AND MEET MANAGER HAS GIVEN SCHOOL PERMISSION TO ENTER MANUALLY

|   | Girls  | _ Boys   |  |  |   |                                     |
|---|--|--|--|--|---|-------------------------------------|
| Name of   | f School (please print):   |  |  |  |   |                                     |
| Name of   | f Coach (please print):  |  |  |  |   |                                     |
| School F  | ax Number (for meet  | information to be sent by manager):  |  |  |   |                                     |
| School E  | Email Address (for mee   | et information to be sent by manager):   |  |  |   |                                     |
| using thing the mames we for score minimum awards | is form or a computer seet. The coach may or will be forwarded to the ring purposes, five, six n of five entries to be and advancement. At the | cimum of ten individuals' names for the resubstitute form (HyTek option), the coach only declare a maximum of seven individuals. State Meet Director should they qualify for seven of the names listed will be on the eligible for the team championship. All other the state meet, declaration of the entrants. | will declare was to run in the corn the State Mais form will be er individuals | hich of these<br>e regional med<br>leet as the off<br>used and a s<br>will be eligible | ten will actua<br>et. These sar<br>ficial school e<br>school must l | ally ru<br>me te<br>entrie:<br>have |
| OFFICIA<br>##                                     | AL ENTRIES (PLEASE   | E TYPE OR PRINT)  JLL NAME (print legibly)   | GRADE  | REGION   | STATE   | 7                                   |
| 1   | FU   |  | GRADE  | REGION   | DEC   | 4                                   |
|   |  |  |  |  |   | 4                                   |
| 2   |  |  |  |  |   |                                     |
| 3   |  |  |  |  |   |                                     |
| 4   |  |  |  |  |   |                                     |
| 5   |  |  |  |  |   |                                     |
| 6   |  |  |  |  |   |                                     |
| 7   |  |  |  |  |   | 1                                   |
| 8   |  |  |  |  |   | 1                                   |
| 9   |  |  |  |  |   | 1                                   |
| 10  |  |  |  |  |   |                                     |
|   |  | h School Athletic Association Rules and Re<br>high school in the regional and State Cros   |  |  |   |                                     |
| Coach S   | Signature  | Date _   |  |  |   |                                     |
| Principa  | l:   | Athletic Director:   |  |  |   |                                     |
| <b>5 1 1 1 1 1 1 1 1 1 1</b>                      | -<br> -<br>  | T IS NOT NECESSARY TO MAIL AN ELIC   |  | ET!  | TELL DDODL  | <b>-140</b>                         |

IF YOU ARE USING THIS FORM TO ENTER (WITH THE MANAGER'S PERMISSION DUE TO HYTEK PROBLEMS, YOU ARE TO FAX TWO (2) COPIES OF THIS ENTRY FORM.

COPY #1 - Gordon Bocock, State Cross Country Meet Director, Fax:606-678-8916

COPY #2 - Regional Meet Manager per listing (confirm fax receipt by phone)

IF THIS FORM IS USED FOR ENTRIES, IT MUST BE RECEIVED BY BOTH THE KHSAA REP AND THE MEET MANAGER NO LATER THAN 5:00 P.M., 5 DAYS PRIOR TO THE REGIONAL MEET.