

**NCHSAA Track and Field Regional Championship
LATE ENTRY FORM**

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

Last Name, First Name	Grade	Event	Mark	M/F	SITE & DATE

**Note: This form must be received by the NCHSAA no later than 9am on Monday, April 27, 2015.
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 Regional meet.
No entries after this will be accepted.**