

NCHSAA TEAM PLAY-OFF DECLARATION

This form must be completed and submitted 2 days before that sport's reporting deadline.

SCHOOL

CLASSIFICATION

SPORT

MEN/WOMEN

CONFERENCE

We, the undersigned, are requesting the "OPT-OUT" provision for our school.

We know our team could make the play-offs. We further understand that by submitting this form, we forfeit the right to participate in the NCHSAA Championship playoffs.

Superintendent

Date

Principal

Date

Athletic Director

Date

Head Coach

Date