

## INDOOR TRACK AND FIELD POLE VAULT COACH FORM

## PLEASE COMPLETE THE INFORMATION BELOW AND RETURN VIA EMAIL TO:

rhonda@nchsaa.org

**DEADLINE: WEDNESDAY, JANUARY 10, 2024** 

Please print the following information

SCHOOL NAME: \_\_\_\_\_

REGION: (Example: 4A East)		_
WOMEN'S POLE VAULT COACH:		_
MEN'S POLE VAULT COACH:		
By signing this form, I am verifying the a serve as the pole vault coach for my high INDOOR TRACK AND FIELD Champall required courses for their respective p NFHS Coaching Pole Vault and Concussi Coaches must be on the school's me wault pass for the state champions.	school during the 2024 NCHSAA State pionship meets. I certify they have consositions including, but not limited to, ton in Sports courses.  **aster eligibility list to receive a page 1.5.	e npleted the
Athletic Director's Name	Signature	Date
Principal's Name	Signature	Date