SOUTH DAKOTA HIGH SCHOOL ACTIVITIES ASSOCIATION

APPLICATION FOR SANCTION OF ATHLETIC AND/OR FINE ARTS CONTEST WITH NON-MEMBER

Name of Member School: _____

Opponent: _____

Indicate the Contest: _____

Date of Contest: _____

Signed _____
Superintendent or Principal

All participants from the member school must meet all eligibility requirements.

NOTE: This form is to be used only when scheduling a team that is NOT a member of any Association.

OFFICIAL ACTION OF SDHSAA

Sanction: Granted Withheld

By: _____ Date: _____
SDHSAA Representative

Return to: South Dakota High School Activities Association
P.O. Box 1217, Pierre, South Dakota 57501
Fax: 605-224-9262

Due Date: One week prior to contest