



IESA CERTIFICATION LIST

The fields in this form will accept a cursor and can be filled out prior to printing.

List all students who will be participating on the IESA team for the sport listed to the right. Any student who participates must be listed. This form must be completely filled out and kept on file prior to your first interscholastic contest in this sport. **You no longer need to send a copy to the IESA office or to your opponents.** The IESA reserves the right to request a copy of this Certification List at any time. Please retain a copy for your records.

School

City

ZIP Code

Coach's Home Phone

Boys	Girls
<input type="radio"/> Baseball	<input type="radio"/> Softball
<input type="radio"/> Cross-Country	<input type="radio"/> Cross-Country
<input type="radio"/> Basketball	<input type="radio"/> Basketball
<input type="radio"/> Wrestling	<input type="radio"/> Volleyball
<input type="radio"/> Track & Field	<input type="radio"/> Track & Field

We hereby certify that each person whose name appears on this list has complied in all respects with the requirements of the Illinois Elementary School Association and is eligible to participate in interscholastic contests under said rules; and that the following data is correct.

Administrator's signature _____ Date Signed

Coach's signature _____ Date Signed

THIS COPY MUST BE UPDATED WHENEVER THERE ARE ADDITIONS, NOT VALID UNLESS CORRECTLY SIGNED!

	Name of Student	Grade	Birth Date	Last Physical
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>