ILLINOIS HIGH SCHOOL ASSOCIATION

The IHSA governs the equitable participation in interscholastic athletics and activities that enrich the educational experience.

2715 McGraw Drive / Bloomington, IL 61704 Tel 309.663.6377 / Fax 309.663.7479 / www.ihsa.org

# IHSA Pass Gate List
# (Not Valid for State Final Events)

The following are the only persons representing a member school to be admitted free to this contest. The top eight (8) categories will be admitted for the entire tournament. Rostered players will only be admitted accompanied by the coach.

Participating schools must complete this form and return it to the tournament manager prior to the start of the event.

Sport/Activity: _____

Host School: _____

Level of Contest: _____

Your School: _____

The top four (4) are allowed to have one (1) guest. Guests 1-3 must arrive with administrator. Guest 4 may arrive late.

## Administration

1. _____
2. _____
3. _____
4. *Head Varsity Coach* _____ *Guest:* _____

**The remaining coaches, etc. are allowed entry into the tournament but are not permitted a guest.**

5. *Assistant Coach* _____
6. *Assistant Coach* _____
7. *Assistant Coach* _____
8. *Assistant Coach* _____
9. *Manager* _____
10. *Scorekeeper* _____
11. *Video/Camera Operator* _____
12. *Bus Driver* _____
13. *Athletic Trainer* _____
14. *All rostered players according to the terms and conditions.*

**All other representatives from your school must pay to attend an IHSA tournament.**

**In case of Emergency or need to communicate changes to your school:**

Contact Person: _____ Contact Person: _____

Cell Phone: _____ Cell Phone: _____

Email: _____ Email: _____