

FAX TO TOURNAMENT MANAGER BEFORE THE OPT-OUT DUE DATE

AND FAX A COPY TO THE MHSAA AS SOON AS YOU KNOW YOU WILL NOT PARTICIPATE IN A TOURNAMENT.

Updated 08/20/09

TOURNAMENT OPT-OUT FAX FORM

Date:	·	Time:	Fax Phone:			
To:	(Tournament	Manager)	School:			
From:			Fax Phone:			
			School:			
Based upon your MHSAA Membership Resolution and your sport participation history, your sports teams were assigned to the enclosed MHSAA first round sites. Schools must notify their tournament managers by the Opt-Out Due Date if they DO NOT intend to participate in a previously assigned MHSAA tournament. Complete and send/fax the below information to the Tournament Manager(s) and the MHSAA by or before the Opt-Out Due Date. Please retain a copy of this information for your files.						
(MI	HSAA Member Hi		T PARTICIPAT	E in the be	elow listed tournan	nent.
Sport:	-					
	ent Assigned: and Location)					
Today's D	oate:	Opt-Out Due Date:				
Did you s	oonsor a team in t	this sport this year?		Yes	No	
Will you sponsor a team in this sport next school year?			r?	Yes	No	
Reminde	r: Official's ratin	gs still must be submitte	ed in this spo	rt for regu	lar season conte	sts.
			Athletic Director's Signature			

SEND/FAX THIS INFORMATION TO THE TOURNAMENT MANAGER BEFORE THE OPT-OUT DUE DATE.

(Fax a copy to the MHSAA: 517-332-4071)