2008 OFSAA CROSS COUNTRY PRACTICE ELIGIBILITY FORM

SCHOOL NAME: _____ ASSOCIATION: _____
DATE: _____

Please list the number of practices attended per week.

ATHLETE'S NAME	Sept. 2 – 5	Sept. 8 - 12	Sept. 15 - 19	Sept. 22 - 26	Sept. 29 – Oct. 3	Oct. 6 - 10	Oct. 14 - 17	Oct. 20 - 24	Oct. 27 –Oct. 31	Total Number of Practices

Any athlete participating in an OFSAA Championship or an OFSAA qualifying event must have participated as a member of a bona fide high school program during the school season (September to November), in a minimum number of practices (sixteen (16)), at a location where the majority of their high school practices are held under the supervision of a teacher-coach as certified by the high school principal.

Coach's Signature: _____

Principal's Signature: _____