

# 2014 IHSA Girls Tennis - Early Request Tennis Sectional



To: The Principals of schools participating in the IHSA Girls Tennis Sectionals

From: The Sectional Manager \_\_\_\_\_  
(Sectional Manager)

This correspondence is requesting your approval for the IHSA Girls Tennis Sectional, held at

\_\_\_\_\_ High School

to begin on Friday, October 17, 2014 at \_\_\_\_\_ p.m.

This request is made for the following reasons:

Number of teams competing in the Sectional \_\_\_\_\_

Number of rounds to be completed on Friday \_\_\_\_\_

Number of rounds to be completed on Saturday \_\_\_\_\_

Number of courts available for play \_\_\_\_\_

Please be advised that a round of tennis requires anywhere from one to three hours. In accordance with the IHSA Tennis Terms and Conditions, it is necessary for all the principals of the participating schools to approve such a request in writing. Thank you for your consideration.

\_\_\_\_\_  
(Participating School)

\_\_\_\_\_  
(Participating School Principal)

(please print)

**Principals, please return this form to the host school**

Fax: \_\_\_\_\_

### ACTION

Approve: \_\_\_\_\_ Disapprove: \_\_\_\_\_

\_\_\_\_\_  
(Participating School Principal's Signature)

**Note: Sectional managers who wish to begin play on Friday, before 4:00 p.m. must have written approval from all participating school principals. Please use this form for authorization. This form will replace contacting the IHSA for an early start approval.**