

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

## March 2014

To the Principal/IHSA Official Representative Addressed:

It's time again for your school to renew its membership in the Illinois High School Association. For the 2014-15 school term, IHSA membership will not require payment of membership dues or state series entry fees per action of the IHSA Board of Directors.

Your school may renew membership in the Illinois High School Association by confirming that your school continues to be Recognized by the Illinois State Board of Education and by certifying that your Board of Education/Governing Board has voted to adopt and abide by the Constitution, By-laws, Terms and Conditions, and Administrative Procedures, Guidelines, and Policies of the Association for the 2014-15 school term.

Your 2014-15 membership renewal is due by June 15, 2014. Please do not delay. Obtain your Board of Education's action on the membership resolution and fax it to (309) 663-7479 on or before **June 15**.

Sincerely,

Martin L. Hickman, Ed.D. Executive Director

## THIS FORM MUST BE SIGNED BELOW, ON THE APPROPRIATE LINE, BY THE PRINCIPAL OR OFFICIAL REPRESENTATIVE AND THE BOARD PRESIDENT OR SECRETARY. <u>DO NOT DETACH</u>

| To: IHSA Executive Director  |                       |  |
|--|-----------------------|--|
| We certify that is understood that failure to be recognized by the Illino IHSA and that if this were to occur; it is our responsibil | ois State Board of E  | is recognized by the Illinois State Board of Education. It ducation will disqualify our school for membership in the otify the Association of this change in status. |
| membership in the Illinois High School Association, an   | nd to adopt and abide | ng held on, 2014, voted to renew by the Constitution, By-laws, Terms and Conditions, and ool Association for the year of July 1, 2014, through June                  |
| Principal/Official Representative Signature  |                       | Board President or Board Secretary Signature   |
| Please Type or Print Name and Phone Number   |                       | Please Type or Print Name and Phone Number   |
|  | High School           | . Illinois   |