

2023 IHSA Boys Tennis Sectional Request for Earlier Start Time

To: Principals of schools partic	pating in the IHSA Boy	rs' tennis sectional		
From: Sectional manager		(Sectional manager's	s name)	
RE: Request for earlier sections		,		
	ease use this form for	authorization. This form	quired for all principals of participating schools to m will replace contacting the IHSA for an early start	
This correspondence is request	ng your approval for th	ne IHSA Boys Tennis Se	ctional, held at	
	to begin o	on Friday, May 19 th at _		
This request is made for the following	owing reason(s):			
Number of teams com	peting in the Sectional			
Number of rounds to I	oe completed on Friday			
Number of rounds to I	oe completed on Saturd	day		
Number of courts available for play				
Pending weather				
		(Participating school)		
	(Pa	(Participating school principal) ACTION		
	Approve:		:	
	(Participa	ating school principal's	signature)	
	Please re	turn this form to the ho	ost school:	
FAX:	or E-Mail:			