

Louisiana High School Athletic Association
P O Box 90011
Baton Rouge, LA 70879-0011
Telephone: (225) 296-5882 Fax: (225) 296-5919

SPORTSMANSHIP REPORT

Sport _____ Date _____

_____ vs. _____
Home Team *Visiting Team*

<i>Name Of Disqualified Person</i>	<i>Player Or Coach</i>	<i>Jersey Number</i>	<i>School</i>

Description of events pertinent to the disqualification **or** reason for disqualification:

(Use back if additional space needed)

Official making report _____ Date _____
Signature

Names of Officials Working the Contest: _____

Forward original and one copy to the assignment secretary of your local association. He will in turn mail to the Louisiana High School Athletic Association within three (3) days of the infraction(s).

_____ Date _____
Signature of Assignment Secretary

Association _____