



KHSAA ANNUAL MEETING DELEGATE DESIGNATION FORM

KHSAA Form GE31
Rev. 8/09

School _____

Delegate for September 22, 2009

Position in School _____

Email Address

Principal and/or Designated Representative's Authorizing Signature

Date

Other persons attending meeting:

<u>Name</u>	<u>Position in School</u>
_____	_____
_____	_____
_____	_____

Mail to:
KHSAA Delegate Assembly
2280 Executive Dr.
Lexington, KY 40505

Fax to:
(859) 293-5999

There are no Constitutional qualifications for Delegates. Each member school through its Principal, designates the delegate to represent that school at the voting session.

Please mail or fax to the KHSAA on or before September 11, 2009 so that proposals and other information may be mailed to the school in a timely fashion.

If you have any question please do not hesitate to contact our office at (859) 299-5472.

This form may also be submitted electronically by emailing it to jtackett@khsaa.org.