

**MISSISSIPPI HIGH SCHOOL ACTIVITIES ASSOCIATION
POST OFFICE BOX 127
CLINTON, MS 39060**

2015 - 2016 STATEWIDE PASS REQUEST FORM

Eligible Recipients: Class III (Certified Officials in Basketball and Football) all other sports 5 yrs. experience

Sport _____ Association _____

LIST MUST BE TYPED OR NEATLY PRINTED.

	Name	Class III (Certified) or 5 Yrs. Experience
1		
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Total Number of Passes _____ X \$30.00 = _____

Assigning Secretary Signature

MHSAA Office Use Only	
Check No. _____	Date _____
From _____	
P. O. No. _____	Date _____
Amount _____	
Date Deposited _____	