

FAX TO UIL OFFICE

TO: District Chair for Volleyball

FROM: UIL Athletic Office

DATE: July, 2008

SUBJECT: District Chair

The UIL office has you listed as Volleyball chairman for the 2008-2009 Volleyball season. **If you are the district chair, please fill in the information below. If you are not the chair, complete the information listing the correct chair and their school.** Fax this memo to the UIL by August 15, 2008. This will ensure the correct person receives the district certification form. Thank you for your prompt attention to this matter.

Fax (512) 471-6589 to the UIL office by August 15, 2008.

Volleyball District _____ -1A

Volleyball District Chair City/School (ISD) _____

Volleyball District Chair's Name _____

Volleyball District Chair's Title _____

Volleyball District Chair's E-mail _____