Ohio High School Athletic Association 4080 Roselea Place Columbus, Ohio 43214 (p) 614.267.2502 (f) 614.267.1677 Web Site: www.ohsaa.org

## POLE VAULT CERTIFICATION FORM

Directions: Please complete all blanks and sign. This form shall be handed to the head pole vault official when the vaulter(s) report to warm-up. Presenting an improperly completed form or if no form is presented will result in the vaulter(s) being excluded from competition. PLEASE PRINT. Include first and last name.

SCHOOL		DATE		
COMPETITOR NAME	NUMBER	VAULTER'S WGT	POLE DESCRIPTION	POLE RATING(S)
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			_	
			_	
			_	
COACH'S SIGNATURE				
Directions: Please complete a warm-up. Presenting an improcompetition. PLEASE PRINT	roperly completed for . Include first and la	orm or if no form is present st name.	ted will result in the vaulter(s	) being excluded from
SCHOOL			DATE:	
COMPETITOR NAME	NUMBER	VAULTER'S WGT	POLE DESCRIPTION	POLE RATING(S)
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**COACH'S SIGNATURE**