

# SCHOOLS CONTEST EJECTION

This form must be completed by the administrator of the offending school within 24 hours after an ejection according to ASAA Bylaw Article 6, Section 5:

**Sport**

**Level (varsity, jv)**

**Gender**

**Date of event**

**Home school**

**Visiting school**

**Name of ejected individual**

**Individual**

Athlete  Coach

**School**

**Details of the ejection – be specific**

**Date to serve suspension**

**School administrator submitting this form**

**School administrator's signature**

**School administrator's email address**

**School administrator's phone number**

**ALASKA SCHOOL ACTIVITIES ASSOCIATION**

Scan and email this form to [office@asaa.org](mailto:office@asaa.org) or fax to 907-561-0720