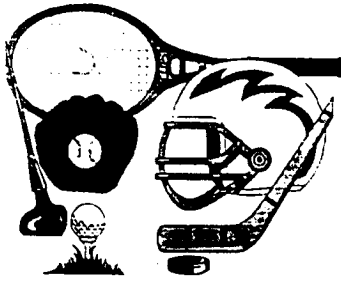


SINGLE FORM PROVIDED, DUPLICATE IF NEEDED



Virginia High School League, Inc.
1642 State Farm Blvd.
Charlottesville, Virginia 22911
804-977-8475, 804-977-5943 (FAX)

**OFFICIALS' ASSOCIATION
PLAYER EJECTION REPORT FORM
(Must be reported within 7 days of ejection)**

Official's Association: _____ Date of Ejection _____

Name of Ejected Player _____ Number _____

Sport _____ School _____

Opposing School _____

Date of Report _____ Signature: _____

Reason for Ejection _____

★ ★ ★ ★ ★ ★ ★

Comments: _____

Please complete this form within seven (7) days of the ejection(s) and send to the VHSL office. **All ejections must be reported.** A red card in soccer or field hockey will require inclusion on this form.