

# WASHINGTON SCHOOLGIRLS LACROSSE ASSOCIATION

## WSP BACKGROUND CERTIFICATION

As Athletic Director, Program Board President, or Head Coach I certify that **all** members of the coaching staff associated with this program have undergone the Washington State Patrol background check prior to any contact with participants.\*

Name \_\_\_\_\_

Position \_\_\_\_\_

Program \_\_\_\_\_

Date \_\_\_\_\_

\*Signed Form due to League Secretary by February 25, 2008.