KHSAA REGION/STATE TENNIS TOURNAMENTS

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PLAYER PROFILE FORM

*Please Type or Print Legibly*

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| --- | --- | --- | --- |
| **BOYS** | **GIRLS** | **SINGLES** | **DOUBLES** |

(Check one)

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| --- | --- | --- | --- |
| **PLAYER’S NAME** | **SCHOOL** | **YEAR IN SCHOOL** | **REGION NUMBER** |
|  |  |  |  |

**CURRENT SEASON HIGH SCHOOL MATCHES (March 12-May 1)**

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**USTA MATCHES PRIOR TO THE HIGH SCHOOL SEASON**

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| **Dual Match or Tournament Name and Location** | **Date** | **Singles or Doubles** | **Opponent** | **School** | **W/L** | **Match Score** |
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| **Dual Match or Tournament Name and Location** | **Date** | **Singles or Doubles** | **Opponent** | **School** | **W/L** | **Match Score** |

**National/USTA/Regional/Other Rankings-\_\_\_\_\_\_\_\_\_**

***\*INCLUDE OTHER ATTACHMENTS AS NECESSARY WHICH WILL HELP DETEREMINE SEEDING.* FORM MUST BE SUBMITTED TO KHSAA *NO LATER THAN* May 9, 2014.**

**Principal/Coach’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**