|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LOUISIANA HIGH SCHOOL ATHLETIC ASSOCIATION****SOCCER COMPLIANCE CARD****Date:** **Home Team:** **Visiting Team:** **REFEREE:** *I, the undersigned, certify that each of my players is in compliance with Section 1-3 of Rule 4 of the 20\_\_\_\_National Federation of State High School Associations Soccer Rules Book.**An Appropriate Health-Care Professional as* *defined by the LHSAA is available?* YES NO[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.][Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Name & Title: Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Lighting Detector: YES NOIf YES, Operator: Location:  Head Soccer Coach |  | **LOUISIANA HIGH SCHOOL ATHLETIC ASSOCIATION****SOCCER COMPLIANCE CARD****Date:** **Home Team:** **Visiting Team:** **REFEREE:** *I, the undersigned, certify that each of my players is in compliance with Section 1-3 of Rule 4 of the 20\_\_\_\_National Federation of State High School Associations Soccer Rules Book.**An Appropriate Health-Care Professional as* *defined by the LHSAA is available?* YES NO[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.][Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Name & Title: Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Lighting Detector: YES NOIf YES, Operator: Location:  Head Soccer Coach |  |  |
| **LOUISIANA HIGH SCHOOL ATHLETIC ASSOCIATION****SOCCER COMPLIANCE CARD****Date:** **Home Team:** **Visiting Team:** **REFEREE:** *I, the undersigned, certify that each of my players is in compliance with Section 1-3 of Rule 4 of the 20\_\_\_\_National Federation of State High School Associations Soccer Rules Book.**An Appropriate Health-Care Professional as* *defined by the LHSAA is available?* YES NO[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.][Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Name & Title: Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Lighting Detector: YES NOIf YES, Operator: Location:  Head Soccer Coach |  | **LOUISIANA HIGH SCHOOL ATHLETIC ASSOCIATION****SOCCER COMPLIANCE CARD****Date:** **Home Team:** **Visiting Team:** **REFEREE:** *I, the undersigned, certify that each of my players is in compliance with Section 1-3 of Rule 4 of the 20\_\_\_\_National Federation of State High School Associations Soccer Rules Book.**An Appropriate Health-Care Professional as* *defined by the LHSAA is available?* YES NO[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.][Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Name & Title: Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]Lighting Detector: YES NOIf YES, Operator: Location:  Head Soccer Coach |  |  |