

August, 2015

This is to certify that we, _____, have inspected all of our football helmets
(school/church)
that will be used during this season and ALL are in compliance with NOCSAE
regulations. We also certify that if any other helmets are used during this season, they
will also be within compliance.

Name of School:

Date:

Signature of Principal/Pastor:

Signature of Athletic Director:

Signatures of all football coaching staff:

5/6 Head Coach: _____

7/8 Head Coach: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

Assistant: _____

- Please bring this completed form to the PAA Football weigh-in
- Players will weigh in in socks, shorts, and tshirts.
- Coach should bring 2 rosters with players sorted numerically.
- Roster for weigh-ins should have player number, player first & last name, two blank columns and players should be listed in numerical order.

Example:

Number	Weight	Helmet	First Name	Last Name
1	PAA rep will fill in	PAA rep will fill in	John	Smith
3			Joe	Jones

