

**VERIFICATION OF COMPLETION OF
ONLINE TRACK AND FIELD DISTRICT CLINIC**

This form is to be used by all NMAA/NMOA Track and Field Officials who have completed the District Track and Field clinic online. Please complete this form and mail or send back to the NMAA office no later than **March 1, 2019**. Officials failing to take the clinic online with submission of this form by March 1st will not be considered for the NMAA State Track and Field Championships this spring.

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____

I do hereby attest to the fact that I have taken the NMAA District Track and Field Clinic online.

Official's Signature: _____

Date of Completion: _____

Please print this form off and return via mail, fax or email to the NMAA Office
no later than March 1, 2019!

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