

University of Wisconsin-La Crosse Office of Residence Life WIAA State Track Meet Guest Roster and Room Placement – Traditional Halls



School Name:	wing information.		Hall Name:		
Coach/Coaches:		Emergen	cy Contact #(Cell Preferre	ed):	
Please fill in the full na	mes (first and last) of your	coaches and athletes and	assign their roommates. Mak		
Room	ate coaching staff with (Co.	Room	M F	Room	MF
1		1		1	
2		2		2	
Room	M F	Room	M F	Room	MF
1		1		1	
2		2		2	
Room	$M \square F \square$	Room	M F	Room	MF
1		1		1	
2	2.	2		2	
Room	M F	Room	M F	Room	M F
1		1		1	
2		2		2	
Room	M F	Room	M F	Room	MF
1		1		1	
2		2		2	
Room	M F	Room	M F	Room	MF
1		1		1	
2		2		2	
Room	MF	Room	MF	Room	MF
1		1		1	
2		2		2	
Room	M F	Room	MF	Room	MF
1		1		1	
2.		2.		2.	

If you have more guests, please fill out an additional form. Two copies of each form are required at REC check-in.