

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



Please fill out the following information:

School Name:					
Coach/Coaches:	(C. 1. 1) 0 6		gency Contact #(Cell Prefe		
	names (first and last) of you ate coaching staff with (Co		and assign their roommates. M	take sure to specify if a su	ite will be male or
	M:F:		M: F:	Suite	M: F:
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