



March 2024

To the Principal/IHSA Official Representative Addressed:

It is time again for your school to renew its membership in the Illinois High School Association. **For the 2024-2025 school term, IHSA membership will not require payment for membership dues or state series entry fees per action of the IHSA Board of Directors.**

Your school may renew membership in the Illinois High School Association by confirming that your school continues to be Recognized by the Illinois State Board of Education and by certifying that your Board of Education/Governing Board has voted to adopt and abide by the Constitution, By-laws, Terms and Conditions, and Administrative Procedures, Guidelines, and Policies of the Association for the 2024-25 school term.

Your 2024-25 membership renewal is due by June 30, 2024. Please do not delay. Obtain your Board of Education's action on the membership resolution and email it to [general@ihsa.org](mailto:general@ihsa.org) or fax (309) 663-7479.

Sincerely,

Craig Anderson  
Executive Director

**THIS FORM MUST BE SIGNED BELOW, ON THE APPROPRIATE LINE, BY THE PRINCIPAL  
OR OFFICIAL REPRESENTATIVE AND THE BOARD PRESIDENT OR SECRETARY.  
DO NOT DETACH**

To: IHSA Executive Director

We certify that \_\_\_\_\_ High School is recognized by the Illinois State Board of Education. It is understood that failure to be recognized by the Illinois State Board of Education will disqualify our school for membership in the IHSA and that if this were to occur; it is our responsibility to immediately notify the Association of this change in status.

We further certify our Board of Education/Governing Board, at its meeting held on \_\_\_\_\_, 2024, voted to renew membership in the Illinois High School Association, and to adopt and abide by the Constitution, By-laws, Terms and Conditions, and Administrative Procedures, Guidelines and Policies of the Illinois High School Association for the year of July 1, 2024, through June 30, 2025.

\_\_\_\_\_  
Principal/Official Representative Signature

\_\_\_\_\_  
Board President or Board Secretary Signature

\_\_\_\_\_  
Print Name and Phone Number

\_\_\_\_\_  
Print Name and Phone Number

\_\_\_\_\_ High School \_\_\_\_\_, Illinois

2024-25 Membership Renewal

**PLAY SMART. PLAY HARD.®**