

**NATIONAL CATHOLIC FORENSIC LEAGUE
SCHOOL DATA CARD**

Academic Year: **2011 - 2012** (ARCH) DIOCESE: NEW YORK

SCHOOL Name: _____

SCHOOL Address: _____

SCHOOL Phone: (____) _____ Hours: _____

SCHOOL Fax Line: (____) _____ Hours: _____

School Principal Name: _____

Debate Coach: _____ Home Phone: (____) _____

LD ____ Policy ____ PF ____

Address: _____ Work Phone: (____) _____

_____ Cell Phone: (____) _____

Speech Coach: _____ Home Phone: (____) _____

Address: _____ Work Phone: (____) _____

_____ Cell Phone: (____) _____

Other: _____ Home Phone: (____) _____

Address: _____ Work Phone: (____) _____

_____ Cell Phone: (____) _____

Other: _____ Home Phone: (____) _____

Address: _____ Work Phone: (____) _____

_____ Cell Phone: (____) _____

SCHOOL PRINCIPAL'S SIGNATURE: _____

This school is a member in good standing of the Local Diocesan League.

LEAGUE DIRECTOR'S SIGNATURE: _____