

SUDDEN CARDIAC AWARENESS TRAINING VERIFICATION FORM

As a Tournament Director within the Ohio Valley Region I do hereby affirm that I and any person/s acting as Site Director for my tournaments have completed all necessary requirements for the Sudden Cardiac Awareness training (Lindsay's Law) required by the state of Ohio.

_____ Tournament Director Printed Name

_____ Tournament Director Signature

_____ Date

This document can be mailed to:

Ohio Valley Region

6608 Blackhawk Cir

Westerville, OH 43082

Or emailed as a pdf to price@ovr.org.