

GISA HEAT POLICY REPORT FORM

DUE Every 2 Weeks beginning August 1st thru October 31st

NAME OF SCHOOL: _____

SPORT: _____

Summary of Wet Bulb Readings	Monday	Tuesday	Wednesday	Thursday	Friday
Time of 1st Practice					
Wet Bulb Readings					
Beginning					
1 Hr Later					
2 Hr's Later					
End					
Time of 2nd Practice					
Wet Bulb Readings					
Beginning					
1 Hr Later					
2 Hr's Later					
End					
Significant Problems _____					

Steps taken _____					

Outcome _____					

Name of Coach who submitted this information: _____

Email Address: _____

Cell Phone Number: _____

FAX TO: 706-938-1401
EMAIL TO: jon@gisaschools.org