## 2019-2020 NCA MEMBERSHIP REGISTRATION

Complete this form in NCA	its ENTIR	RETY and ma	il with y	our che	eck to:								
500 Charleston Stree Lincoln, NE 68508	t, Ste. 2												
Name:													
Gender:		Male C	) Fema	le	_								
Date of Birth:		/	/										
NSAA High School:													
Middle School/ College/Youth Org/Club:													
Home Address:					(	Please do	o not enter	school ac	ddress)				
City, State Zip:				,	,								
Phone: (	-	E-n	nail:										
Check here if FIRST TIME COACH (clinic fee waived)- OR - Enter # of years in coaching/administration through 2018-2019: Coaching Assignments 2019-2020:													
		PORT	HS VA	RSITY	HS NON-	VARSITY	MIDDLE	SCHOOL	YOUTH	I/CLUB	COLL	.EGE	
	Sr.	OKI	Head	Asst	Head	Asst	Head	Asst	Head	Asst	Head	Asst	
	Boys Cro	ss-Country											
Girls Cross		ss-Country											
	Football												
	Girls Golf												
	Softball												
Boys Tennis													
Volleyball													
Boys Basketball		sketball											
Girls Basketball													
Boys Swimm		imming											
Girls Swimmin		mming											
	Wrestling Baseball Boys Golf												
	Boys Soc	ccer											
	Girls Soc	cer											
	Girls Ten	nis											
	Boys Tra	ck and Field											
	Girls Trac	ck and Field											
	Cheer/Da	ance (Cirlce 1)											
	Bowling												
Administrative Assi Athletic Director Registrant is a PRegistrant is a CRES: NCA Membership:	Assistant Assist	ant Athletic D dent of the I	irector NCA Bo	Ac Dard (m	ctivities Dir	ector 🔲 o fee waiv	Principal /ed).	Assis					
Credit Card Number	r: r	·	$\dashv$						Evni	ration [	)ato: /l	Mo/Yr)	7
(Mastercard, VISA, D	oscover) [			1								on Back of Card:	
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