**South Dakota High School Coaches’ Association**

###### MEMBERSHIP FORM

Name:

Home Address: City:

State: Zip: Home Phone:

School: Email:

**Check all of the boxes that apply:**

Head Coach: BB [ ]  CC [ ]  Cheer [ ]  Dance [ ]  FB [ ]  Gym. [ ]

 Golf [ ]  Tennis [ ]  Soccer [ ]  T&F [ ]  VB [ ]  WR [ ]

Asst. Coach: BB [ ]  CC [ ]  Cheer [ ]  Dance [ ]  FB [ ]  Gym. [ ]

 Golf [ ]  Tennis [ ]  Soccer [ ]  T&F [ ]  VB [ ]  WR [ ]

Athletic Director: [ ]  **Mail your $50 membership fee to:**

##  SDHSCA

##  Jim Dorman, Executive Director

##  801 W Eagle Ridge St

##  Sioux Falls, SD 57108

**SOUTH DAKOTA GOLF COACHES ASSOCIATION**

Membership Application: Effective on or after August 1st

SDHSCA MEMBERSHIP CARD NUMBER\_\_\_\_\_\_\_\_\_\_\_

The only requirement before joining is to be a member of SDHSCA.

PLEASE PRINT:

**Mail with a $10 check to: Joey Liesinger, 800 NE 9th Street, Madison, SD 57042.**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School/Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Region\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone/Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ You are starting \_\_\_\_\_\_\_\_\_\_ Yrs of Coaching (Total yrs)

Check: [ ]  NEW MEMBER [ ]  RENEWAL MEMBER

Head Coach: [ ]  Assistant Coach: [ ]

 [ ]  Boys [ ]  Girls [ ]  Both [ ]  AA [ ]  A [ ]  B

Your email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WE NEED YOUR EMAIL ADDRESS**

Please print neatly

[**http://sdhsgca.k12.sd.us**](http://sdhsgca.k12.sd.us)