**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)