TGCA 2016 San Antonio Sports Clinic
May 20 - 21, 2016
Lanier High School
1514 W Cesar E Chavez Blvd, San Antonio, TX
Cost of Attendance: $70.00 - 2016-17 Membership Card Included

TGCA PERMANENT MEMBERSHIP NUMBER		_____ √ IF NEW MEMBER *NEVER been a TGCA Member before.*
LAST NAME		**MAIDEN NAME (IF APPLICABLE)**
FIRST NAME		**MIDDLE**
ADDRESS		**APT**
CITY		**STATE** **ZIP**
HOME EMAIL		
HOME PHONE ( )		**CELL PHONE** ( )

SCHOOL INFORMATION

SCHOOL_____   ISD _____

CONFERENCE 1A [ ] 2A [ ] 3A [ ] 4A [ ] 5A [ ] 6A [ ]

SCHOOL PHONE	( )	FAX	( )
SCHOOL EMAIL			

MEMBERSHIP TYPE
(Check one)

_____ Past President (Complimentary lifetime membership)

_____ Active (coaching at an elementary or secondary school in TX)

_____ Allied (coaching in college, jr. college, university, or out-of-state school)

_____ Athletic Director (Complimentary if member of THSADA)

THSADA Membership Number: _____**(Required)**

_____ Athletic Coordinator

_____ Associate (not actively coaching/retired)

_____ Student (any student in college/university pursuing a coaching career)

COACHING ASSIGNMENTS
(Circle all that apply)

Varsity Head Coach	Sub-Varsity OR Assistant Coach	Junior High Coach
Basketball	Basketball	Basketball
Cheerleading	Cheerleading	Cheerleading
Cross Country	Cross Country	Cross Country
Golf	Golf	Golf
Soccer	Soccer	Soccer
Softball	Softball	Softball
Swimming Diving	Swimming Diving	Swimming Diving
Track-Field	Track-Field	Track-Field
Tennis	Tennis	Tennis
Volleyball	Volleyball	Volleyball
Wrestling	Wrestling	Wrestling

I wish to register for the following:

_____ [$70] Admittance Fee *(Membership Card Included)*

_____ [$35] Membership *(select only if clinic fee has been paid separately by school or other means)*

_____ [$35] Admittance Fee *(select only if 2016 -17 membership has been paid previously)*

_____ Student Membership Only [$10]

METHOD OF PAYMENT:

Personal Check Number _____   Amount $ _____

School Check Number _____   Amount $ _____

Cash/Money Order   _____   Amount $ _____

Bank Name _____

Visa / Master Card / Discover / American Express

_____Exp: _____

_____ √ if school credit card

There is a $2.50 processing fee per credit card transaction.

TGCA OFFICE USE ONLY:
TID: _____   CC Auth Code: _____