

Share the Membership Form 2007



New Member's Information

Name _____

Address _____

City _____ State _____ ZIP _____

Work Phone (____) _____ Home Phone (____) _____

Fax _____ Birthdate: _____

Email _____

School or Club Name _____ Gender: Male Female

Race/Ethnicity (optional): Asian/Pacific Islander Black Hispanic
 Multi-Racial Native American/Alaska Native White Non-Hispanic

Select a Membership Category

Standard Membership *

Youth/Club Coach Membership

* High school, college, senior amateur, professional and general membership.

Sponsoring Member's Information

Name _____

Address _____

City _____ State _____ ZIP _____

Email _____

NSCAA Member Number _____

NOTE: You MUST include YOUR current NSCAA membership number. We will not be able to honor this request without it.

Return this form to:

NSCAA

Attn: Share the Membership

6700 Squibb Road, Suite 215

Mission, KS 66202

DEADLINE: NOVEMBER 1, 2007

Your sponsored member will receive a letter from the NSCAA informing him/her of your gift membership. The new members will receive a welcome packet approximately six weeks after receipt of this form by the NSCAA office.

Primary Coaching Area (check one)

- Youth/Club
- High School
- Junior College Division I
- Junior College Division III
- NCAA Division I
- NCAA Division II
- NCAA Division III
- NAIA
- NCCAA
- Professional
- Amateur
- Referee
- Other

Coaching: Male Female Both

What is your primary role?

- Coach
- Assistant Coach
- Administrator

NSCAA Coaching Diplomas Earned:

- State
- Regional
- Advanced Regional
- National
- Advanced National
- Premier
- National Youth