

2017-2018 NFCA COACHES CLINIC REGISTRATION APPLICATION

Attendee Information

Name _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Cell Phone (____) _____
 Email _____
 School/Team _____
 Position _____

NFCA Member: Y | N

To become an NFCA member visit NFCA.org



Coaches Clinic Pre-Registration

\$139 Per Person
 *Contact the NFCA for student pricing and pricing for groups 10+

Coaches Clinic On-Site Registration

\$149 Per Person
 *Contact the NFCA for student pricing and pricing for groups 10+

Coaches Clinic Sites

Advanced Chicago

December 1-2, 2017
 *Pre-Register on or before Nov. 28 _____

Chicago

January 5-6, 2018
 *Pre-Register on or before Jan. 2 _____

Louisville / Southern Indiana

January 5-6, 2018
 *Pre-Register on or before Jan. 2 _____

Portland

January 12-13, 2018
 *Pre-Register on or before Jan. 9 _____

Advanced Charlotte

January 12-13, 2018
 *Pre-Register on or before Jan. 9 _____

Minneapolis

January 19-20, 2018
 *Pre-Register on or before Jan. 16 _____

Nashville

January 19-20, 2018
 *Pre-Register on or before Jan. 16 _____

Kansas City

January 26-27, 2018
 *Pre-Register on or before Jan. 23 _____

Accepted methods of payment for NFCA Coaches Clinic registration

We accept official school purchase orders, checks, money orders, or credit cards.

Check/M.O. Included

Credit Card

Credit Card Number: _____

Exp. Date: ____/____/____ CSV _____ Billing Zip Code _____

Cardholder's Name _____



Please send to: NFCA | 2641 Grinstead Dr. | Louisville, KY 40206
 Call: 502.409.4600 | Fax: 502.409.4622 | Email: events@NFCA.org

To register online visit NFCAevents.org

TOTAL \$ _____

For more information, special hotel rates, or to register online visit: NFCAevents.org