

# 2012 TBCA State Clinic Registration Information

MAIL THIS FORM TO:

TBCA Clinic 150 Timberland Drive, Livingston, TN 38570

Make checks payable to: TBCA Clinic

Head Coach Name: \_\_\_\_\_

Assistant(s) attending \_\_\_\_\_

\_\_\_\_\_

School/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Registration: Member of TBCA \$65 (before January 13<sup>th</sup>, 2012) \_\_\_\_\_

**Per Coach**

Non-Member \$85 (before January 13<sup>th</sup>, 2012) \_\_\_\_\_

**Per Coach**

Registration: After January 13<sup>th</sup> and at door will be \$85 for members and \$105 for non-members.

If you need an email confirmation, put address here: \_\_\_\_\_