



GACA Football Coaches Clinic
Hosted by
Georgia State University 2017
 March 24-25, 2017
 For More Information www.gacacoaches.com

COACH / NAME: _____

High School: _____

EMAIL ADDRESS _____ **Cell Number** _____

SCHOOL ADDRESS:

CITY / STATE / ZIP CODE: _____

Registration fee is \$60.00 per coach and \$350.00 for 6 or more from the same staff.
 *THE FIRST 100 COACHES WILL BE REGISTERED FOR 2017 when the payment and this registration form are received in the GACA office. You can register online.

If you or your school are sending more than one staff member, the head coach should complete the form above, list below **all** staff members attending, and mail together with payment as indicated in ORDER TO BE REGISTERED FOR THE 2017 CLINIC.

NAMES OF COACHES ATTENDING AND EMAIL ADDRESS

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

\$ _____ Registration enclosed for _____ coaches at \$60.00 each or \$350.00 Staff Discount enclosed.

TOTAL PAYMENT ENCLOSED \$ _____

CHECKS should be made out to:

GACA Football Coaches Clinic
 P.O. Box 597
 Elberton, GA 30635
 770.578.6366

