

## MEMBERSHIP APPLICATION

Name: \_\_\_\_\_ Year (season) Applying For **2011-2012**

Home Address: \_\_\_\_\_

City, ST, ZIP \_\_\_\_\_

Preferred Contact Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**\*\*E-Mail:** \_\_\_\_\_

**PLEASE write clearly, e-mail address is important as we will try to send out most communications through e-mail.**

School Name: \_\_\_\_\_

Are you: Head Coach: \_\_\_\_\_ Assistant Coach: \_\_\_\_\_ USA Judge: \_\_\_\_\_ NFHS Judge: \_\_\_\_\_

Other (Explain): \_\_\_\_\_

**Membership Type Applying For:** \_\_\_\_\_

**Active Member:** Any adult who is currently coaching or judging women's high school gymnastics or has had a minimum of 5 years coaching/judging at the women's high school level is eligible to become a voting member.

**Professional Member:** Other professionals, who have a strong commitment, participate in and have an involvement in High School gymnastics may become professional members. This may include judges, certified officials, technicians and other individuals who have an area of expertise and are actively involved in High School gymnastics programs and activities. Votes for these members will be counted individually at ½ value of a vote of a Active Member.

**Associate Member:** Any person of integrity, working with or interested in gymnastics shall be eligible to become and associate member. Associate members shall have no voting rights in the corporation.

**Send completed form and your \$25.00 check made out to NHSGA fee to:**

(\$20.00 membership through your state association of 15 or more members submitted at once)

**Patrick Simon (Please make check out to NHSGA)**

**NHSGA Sec/Treasurer**

105 Wilcox Road

Milford, CT 06460

Check #: \_\_\_\_\_

**Membership is effective from August 1<sup>st</sup> – July 31<sup>st</sup>.**

Membership enables a high school coach to:

-Vote in the NHSGA elections (membership application must be postmarked before April 1<sup>st</sup>) in order to participate in the election); submit their athletes and teams for All-American Honor and National Rankings; have a gymnast compete at the NHSGA Senior Showcase; coach a gymnast at the NHSGA Senior Showcase Invitational; receive periodic newsletters; attend and have a voice at the annual NHSGA meeting, receive yearly All American Calendars and Yearbooks (via pdf on line).

**Remember to write in the type of membership you are applying for.**

**Have you ever been denied membership from USA gymnastics? Yes \_\_\_\_\_ No \_\_\_\_\_**

**Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Filling in your name acts as your legal signature)

Please make your e-mail "friendly" to [mcc134@hotmail.com](mailto:mcc134@hotmail.com) and [canfima@mukwonago.k12.wi.us](mailto:canfima@mukwonago.k12.wi.us) and [patrick.simon@snet.net](mailto:patrick.simon@snet.net)