OHIO TENNIS COACHES' ASSOCIATION MEMBERSHIP FORM Fill out ALL Information – Try NOT to leave ANYTHING Blank Please



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	This Membership is for the Calendar Year: (Check)			() 2018	2019	
NAME:						
<u>TITLE:</u>	Head Coach	Boys	_ Girls	Both		
	Assistant Coach / JV Coach	Boys	Girls	Both		
Were y	ou an OTCA Member last year	? (Check) Y	ES NO			
HOME	ADDRESS:					
			Address	S		
	City		State	Zip Cod	2	
PREFER	RED EMAIL ADDRESS:					
PREFEF	RED PHONE NUMBER:					
<u>YEARS (</u> 20:	DN: COACHING: BOYS G 19 BOYS' TEAM TOURNAMENT _ Enter my team DO NOT enter my team			BOYS 2019 GIRLS' Ent	NW SW C/E/SE GIRLS TEAM TOURNAMENT er my team NOT enter my team	
Boy's n	nail applications and checks m FEBRUARY 21, 2019	ust be receive	ed by Gi		ations and checks must be reco	eived
	NEMBERSHIP FEE \$25.00 checks payable to: OTCA) Am	ount Enclosed			
lf you µ	prefer, a credit card payment	can be mad	le by contacting	g OTCA Treasu	rer at 937.371.2235	
Center		(athletic dept. I	nave this addre	l treasurer office and ess in their system. past Treasurer's address.)	