

ADVANCE REGISTRATION FORM LAS VEGAS

2020 NIKE Coach of the Year Clinic Feb. 6th, 7th & 8th, 2020 Excalibur Hotel & Casino

HEAD COACH/NAME:	
SCHOOL AFFILIATION:	
ADDRESS:	
CITY/STATE/ZIP CODE:	
TELEPHONE:	FAX:
E-MAIL ADDRESS:	
	.00 at the door. Schools with 5 to 9 staff members on advance registration only. Schools with 10 or more 599 on advance registration only.
THIS FORM WITH PAYMENT MUST BE RECEI ADVANCE RATES. Space is limited to 1000 reg	·
If you or your school are sending more than one above, list below all staff members attending, and	staff member, the head coach should complete the form d mail together with payment as indicated.
NAMES OF ALL COACHES ATTENDING: MI	UST HAVE E-MAIL ADDRESS TO ACCESS FREE WEBINARS
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Registration enclosed for coaches at \$	S110.00 each \$
A. Less discount for 5-9 coaches (above) \$	10.00 each <>
Staff Registration for 10 or more coaches is \$599	9.00 \$
TOTAL PAYMENT ENCLOSED	\$
Charles should be made payable to:	rac NIKE Coach of the Year Clinics

Checks should be made payable to: Las Ve

Las Vegas NIKE Coach of the Year Clinics

C/O Chrissey Stephens

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Site: www.nikecoyfootball.com