MISS	SISSIPPI ASSOCIA	TION OF COA	CHES	
	st Office Box 1194, Clinton, )1A Clinton-Raymond Rd., C Telephone 601-924-3020 Website www.mse	Clinton, Mississippi 3 • Fax 601-924-305	39056	
	FORM IN ITS ENTIRETY.		-	
PROCESSED UNTIL ALL IN	FORMATION IS RECEIVED	). DO NOT LEAVE A	NYTHING BLANK.	
PROCESSED UNTIL ALL IN PLEASE PRINT CLEARLY! 2021-202	22 Membership A	Annlication F	orm	
PLIEARLY CIEARLY	Personal Informa			
Start here:				
NAME: Last, First (or name you go This is how you will be listed in	by) n the Directory & how your name	will appear on your Mem	ıbership Card.	
Home Mailing Address ** Do NOT use your School Address	Street or P.O. Box #		Apt. No. or Lot No.	
City	State		Zip	
Home Phone	Cell Phone		Work Phone	
E-mail Address				
<b>Coaching Information:</b>	Active Coach	Retired Coach	(If you are retired, stop here!)	
Start here:				
School Name:			- / • Incin	
Please indicate whe	ether this is a Sr. High/ Jr. Hig	n/ Community College	e/ University	
Sport Coached	Head or Assistant	t (	Girls - Boys - Both	
Sport Coached	Head or Assistant	t (	Girls - Boys - Both	
Sport Coached AND/OR:	Head or Assistant	t (	Girls - Boys - Both	
I am: Athletic Director/ Superint	tendent/ Principal/ Other	of Jun	nior High or Senior High	
	lendent/ Principal/ Other		uor High or Senior High	

## Please Note: Purchase orders are NOT accepted. \_\_\_\_\_I WAS a member last year (2020-2021). I have enclosed \$70 for my membership dues. \_\_\_\_\_I WAS NOT a member last year (2020-2021). I have enclosed \$75 for my membership dues. \_\_\_\_\_I am retired and not currently coaching. I have enclosed \$25 for my membership dues.

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I coach at an out-of-state school. I have enclosed \$75 for my membership dues.