

KCCTFCA Winter Coaching Clinic Registration:

Name: _____

School: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

E-mail: _____

Postmark registration by January 4, 2011

Make copies of this registration form as

Send registration and \$75 registration fee to:

KCCTFCA
c/o J.J. Wannamaker
10012 Ballentine
Oveland Park, KS 66214

Make checks payable to: KCCTFCA

Visa & MasterCard Accepted at Clinic