



THSCA ID #:  I CAN'T REMEMBER MY ID NUMBER  
 I'VE **NEVER** BEEN A MEMBER BEFORE

DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ GENDER:  M  F

FOR OFFICE USE ONLY:

P.O. DRAWER 1138, SAN MARCOS, TX 78667  
 512.392.3741 OFFICE 512.392.3762 FAX

## CONTACT & SCHOOL INFORMATION

\_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE NAME

\_\_\_\_\_  
PREFERRED MAILING ADDRESS APARTMENT/UNIT #

\_\_\_\_\_  
CITY STATE ZIP MOBILE PHONE

I agree to receive THSCA Email Updates & Reminders.

\_\_\_\_\_  
PREFERRED EMAIL ADDRESS PREVIOUS SCHOOL WHERE EMPLOYED (IF APPLICABLE)

\_\_\_\_\_  
CURRENT SCHOOL (WHERE EMPLOYED OR ATTENDING) SCHOOL CITY SCHOOL DISTRICT

\_\_\_\_\_  
SUPERVISOR'S NAME & TITLE (FOR EMPLOYMENT VERIFICATION) WORK PHONE

CHECK ALL THAT CURRENTLY APPLY:	SPORTS YOU ARE CURRENTLY COACHING:
<input type="checkbox"/> ATHLETIC DIRECTOR	1. <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> JUNIOR HIGH <input type="checkbox"/> HS HEAD COACH <input type="checkbox"/> BOYS <input type="checkbox"/> GIRLS
<input type="checkbox"/> ATHLETIC COORDINATOR	2. <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> JUNIOR HIGH <input type="checkbox"/> HS HEAD COACH <input type="checkbox"/> BOYS <input type="checkbox"/> GIRLS
<input type="checkbox"/> ATHLETIC TRAINER	3. <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> JUNIOR HIGH <input type="checkbox"/> HS HEAD COACH <input type="checkbox"/> BOYS <input type="checkbox"/> GIRLS
<input type="checkbox"/> RETIRED FROM EDUCATION	

The THSCA membership year will run from July 1<sup>st</sup> to June 30<sup>th</sup> of the following year, congruent with UIL and academic calendars. A portion of every membership fee goes to the THSCEF as an education fee. Applications submitted for individuals who are not current members of the THSCA, will be issued a membership for the CURRENT year, and given immediate access to THSCA online member services. The membership fee will NOT be pro-rated. If the applicant already has a current membership when submitting this application, the fee will be considered a renewal and be applied for the upcoming membership year.

1. SELECT MEMBERSHIP TO PURCHASE:	2. COACHING SCHOOL OPTIONS:	3. OTHER ITEMS:
<b>PROFESSIONAL MEMBERSHIP \$70</b> Shall include all coaches and athletic administrators employed at a school in Texas under the direction of the University Interscholastic League.	<b>REGISTRATION</b> <b>\$60</b> If paid by 6/1. <b>\$75</b> If paid between 6/2 - 7/1. <b>NO REFUNDS OR TRANSFERS ACCEPTED AFTER JULY 1ST.</b> On-site Registration fee will be \$90.	<b>BENEVOLENCE FUND DONATION</b> (THSCA MEMBER DONATION) - \$5 (increments)
<b>RETIRED MEMBERSHIP- \$70</b> Shall include all members in good standing of the THSCA, who have completed their coaching career and are no longer employed by an educational institution of any kind.	<b>STUDENT REGISTRATION - \$25</b>	<b>POLITICAL ACTION COMMITTEE</b> (THSCA MEMBER DONATION) - \$5 (increments)
<b>STUDENT MEMBERSHIP- \$30</b> Shall include any individual actively pursuing a teaching certification & a career in coaching.	<b>HALL OF HONOR TICKET - \$55</b>	<b>PROFESSIONAL LIABILITY INSURANCE</b> See Eligibility Requirements for Professional Liability Insurance Coverage** - \$58
<b>AFFILIATE MEMBERSHIP- \$70</b> Shall include all coaches and athletic administrators employed at a Private, Parochial, or out of state school, all College/University employees, and all individuals wishing to support the efforts of the THSCA.	Tackle Training sessions on-site at Coaching School 2022 will have limited seating. <b>You must reserve your seat in advance.</b> Indicate below what course you need to attend and we will attempt to reserve you a seat if there is still an available session.	<b>**2022-2023 COACHES LIABILITY INSURANCE CRITERIA**</b> Coverage effect 7/1/22 through 6/30/23. Coverage purchased after 7/1/22 will commence on the payment received date. This coverage is not retroactive. You must be a coach, athletic trainer, or athletic director, including classroom duties, for an accredited secondary school, college, junior college or university within the state of Texas. Your THSCA membership must be current for the 22-23 school year to be eligible to purchase this coverage. If you choose to purchase this coverage & do not meet the criteria for eligibility, this coverage will not be valid. (Annual Premium \$52.00; State Taxes & Fees (4.925%) \$2.56; Association Admin. Fee \$3.44; TOTAL 22-23 Renewal Premium: \$58.00)
<b>ALL THSCA Memberships include a subscription to Texas Coach magazine, please select your preferred method of delivery:</b> <input type="checkbox"/> MAIL ME A COPY <input type="checkbox"/> EMAIL DELIVERY	<input type="checkbox"/> THIS IS MY <b>FIRST YEAR COACHING FOOTBALL, AND I NEED THE INITIAL CERTIFICATION - TACKLE TRAINING 1.0</b> <input type="checkbox"/> I HAVE PREVIOUSLY BEEN CERTIFIED, AND I NEED TO RENEW MY CERTIFICATION - <b>TACKLE TRAINING 2.0</b>	

PAYMENT SUBMITTED BY	TOTAL AMOUNT DUE:
<input type="checkbox"/> INDIVIDUAL OR <input type="checkbox"/> SCHOOL (SCHOOL/ISD: _____)	EXP DATE CVV-CODE (Last 3 Digits on the back)
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK # _____	CARDHOLDER'S ADDRESS (IF DIFFERENT THAN ABOVE) STREET ADDRESS
<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> DISCOVER NETWORK <input type="checkbox"/> AMERICAN EXPRESS (PLEASE MAKE CHECKS PAYABLE TO THSCA)	CITY, STATE ZIP CODE
CREDIT CARD NUMBER	CARDHOLDER'S NAME (PRINT) CARDHOLDER'S SIGNATURE