



MAIL IN REGISTRATION FORM

**MOBILE, AL**

NIKE Coach of the Year Clinic  
February 10-12, 2011  
Renaissance Riverview Plaza Hotel

COACH/NAME: \_\_\_\_\_

SCHOOL AFFILIATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

COACHING INFORMATION: \_\_\_\_\_ Head Coach \_\_\_\_\_ Off. Coach  
\_\_\_\_\_ Def. Coach \_\_\_\_\_ Other

Registration fee is \$75.00 in advance and \$90.00 at the door. Schools with 5 to 7 staff members attending receive a \$5.00 discount, per coach, on advance registration only. Schools with 8 or more staff members attending receive a \$10.00 discount, per coach, on advance registration only.

THIS FORM WITH PAYMENT MUST BE **RECEIVED** BY FEB. 1, 2010 IN ORDER TO RECEIVE ADVANCE RATES. Space is limited to 450 registered coaches.

If you or your school are sending more than one staff member, the head coach should complete the form above, list below **all** staff members attending, and mail together with payment as indicated.

NAMES OF COACHES ATTENDING:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Registration enclosed for \_\_\_\_\_ coaches at \$75.00 each \$ \_\_\_\_\_

5-7 coaches from same staff \$70.00 each \_\_\_\_\_

8 or more coaches from same staff \$65.00 each \_\_\_\_\_

TOTAL PAYMENT ENCLOSED \$ \_\_\_\_\_

Checks should be made payable to : NIKE Coach of the Year Clinic  
713 Dauphin Street Mobile, AL 36602  
251-648-1225 Fax 251-438-6180  
Site: [www.nikecoyfootball.com](http://www.nikecoyfootball.com)