



2017-2018 Membership Form

Team Membership

TEAM NAME _____

SCHOOL _____

SCHOOL ADDRESS _____

COACH _____

HOME ADDRESS _____

E-MAIL _____

PHONE _____

CO- or ASST. COACH _____

E-MAIL _____

PHONE _____

I prefer mailings to my: _____ home address _____ school address

_____ Yes, our coaches are attending Fall Convention on October 7, 2017 (\$25 per team)

Number of coaches attending from our team: _____

_____ No, our coaches are not attending Fall Convention on October 7, 2017

_____ Our coaches are undecided at this time about attending Fall Convention.

Note that 2017 Fall Convention will be for coaches only.

Membership Dues:

\$50 team membership _____

\$150 corporate membership _____

\$25 individual member _____

\$0 active board member _____

\$25 team Fall Convention fee, unlimited number of coaches _____

Total due _____

Make check payable to NDADD and send it to:

Meghan Vollrath
1731 21st Ave. NE
Grand Forks, ND 58203

This form and full payment must be postmarked by October 1.