



APPLICATION FOR MEMBERSHIP

January, 2012-January, 2013

ATHLETIC DIRECTOR/HEAD COACH.....\$40.00

ALL COACHES.....\$40.00

Make checks to: LHSADA

NAME _____

SCHOOL _____

SCHOOL ADDRESS _____

CITY/STATE _____ ZIP CODE _____

DISTRICT _____ CLASSIFICATION _____
(AAAAA, AAAA, AAA, AA, A, B, C)

CONTACT INFORMATION:

PHONE # _____

E MAIL _____

Mail to: Mary Carter, CAA
LHSADA Treasurer
2165 Guardian Ave
Terrytown, LA 70056