



2017-18
MEMBERSHIP FORM

Name _____ Home Address _____

School _____

School Address _____

Home email address _____

PHONES School _____ Home _____ Cell _____

School email Address _____

Coach _____ Official _____ Level _____

(Jr. High/ H.S./ College/Other)

School Classification _____ Number of Years Coaching _____

Coaching Record _____ Victory Club Member Level _____ Year _____

As our association continues to grow and becomes more recognized, there is more work to be done each year. Please check the following areas in which you would be willing to assist the K.V.A. staff.

- K.V.A. officer Victory Club chairperson
 Class representative for rankings Area representative for rankings
 All State Tournament Team Selection committee chairperson
 All State Tournament Team Selection committee
 All Star selection committee Worker at All Star Match
 Academic Award Chairperson
 League representative; Name of League _____
 All State selection committee

Membership is \$25.00 and should be mailed to: Cathy Foote, K.V.A. Secretary
2406 Marion Ave.
Manhattan, KS 66502
785-539-3887 or 785-532-8807
cathyfooteffg@cox.net

To assist with the bookkeeping: () Renewal with no address change
() Renewal with address change () New membership