

TEAM ID CODE

Please fill in

Coach's Last Name: _____
State Abbreviation

SCTP NSSA-NSCA MEMBERSHIP APPLICATION

PLEASE NOTE: THIS PROGRAM IS AVAILABLE TO YOUTH ONLY

Please check the applicable box or boxes.

(Please list membership # along with contact info if you are a current member)

MEMBER INFORMATION:

☐ NSSA Membership: \$20 ☐ NSCA Membership: \$20 ☐ Male ☐ Female

Membership#(NSSA): _____ Membership#(NSCA): _____

Name: _____ Birth date: _____
First Middle Last Month/Day/Year

Address: _____
Street or Box

_____ City State Zip

Phone: _____ E-Mail: _____

PAYMENT INFORMATION:

☐ Check enclosed ☐ Credit Card number: _____

☐ MasterCard ☐ VISA Expiration Date (mm/yy): ____/____

Signature: _____

The SCTP Membership includes 12 issues of the Skeet Review or Sporting Clays Magazine. (If you join both Associations you will receive both magazines).

Please include a check or credit card information for membership.

NSSA-NSCA
Re: SCTP Registration
5931 Roft Road
San Antonio, TX 78253