



# BASKETBALL COACHES ASSOCIATION of MICHIGAN

## 2018-2019 SINGLE-GENDER High School MEMBERSHIP FORM

Membership Year: 6/1/18 – 5/31/19. **Membership registrations accepted 5/10/18 – 2/15/19**

**This form is ONLY for schools which are “all-boy” or “all-girl” high schools. ALL other schools who wish to sign up at the School Membership rate, MUST fill out the \$80 School Membership Form even if you are signing up just your boy’s or girl’s coaches.**

School Name: \_\_\_\_\_ Class of HS \_\_\_\_\_  
Athletic Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Basketball League/Conference: \_\_\_\_\_  
Athletic Office Phone: \_\_\_\_\_  
Name of person filling out this form \_\_\_\_\_

**SCHOOL MEMBERSHIP:**

**\$ 40 for up to 8 coaches**

8 coaches MAXIMUM.

**This form is for Single-Gender HS coaching staffs only.**

Only ONE Head Varsity Coach allowed per \$40 School Membership.

**ALL** coaches will be members of BCAM, Mich. High School Coaches Assn. & National HS Basketball Coaches Assn.

**Make check or money order payable to:**  
BCAM • Basketball Coaches Association of Michigan

**Send payment and this entire form to:**  
BCAM  
PO BOX 2063  
MIDLAND, MI 48641-2063

**Website:** [www.bcam.org](http://www.bcam.org) **BCAM Hotline:**(517) 580-8366 **Fax:** (989) 486-3625 **Email:**secretary@bcam.org

**\*\*A unique individual EMAIL ADDRESS is REQUIRED for EACH coach. If no valid email address is given, that coach may not receive BCAM newsletters or information, nor will they be able to vote for Mr/Miss Basketball or vote in any other BCAM election. Print Clearly.**

### 1. Varsity HEAD Coach: Boy’s Girl’s

Name \_\_\_\_\_  
Email (REQUIRED) \_\_\_\_\_  
Mailing Address (required): \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** (Award given for every 100 wins)  
Number of HEAD Varsity Basketball Wins \_\_\_\_\_  
Number of Non-Varsity Basketball Wins \_\_\_\_\_  
Number of Years of Coaching Basketball \_\_\_\_\_

### Other Coaches/Individuals:

**2. Name** \_\_\_\_\_  
Email (REQUIRED) \_\_\_\_\_  
Mailing Address (required): \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**  
(Circle all that apply)

**Girls:** Var Asst JV Frosh Jr Hi Elem  
**Boys:** Var Asst JV Frosh Jr Hi Elem  
AD Official Retired Other

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**3. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**

**4. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**

**5. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**

**6. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**

**7. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**

**8. Name** \_\_\_\_\_

Email (REQUIRED) \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_

**Optional:** Number of HEAD Varsity Wins \_\_\_\_\_ Number of Non-Varsity Wins \_\_\_\_\_ Number of Years of Coaching \_\_\_\_\_

**Coaching Level for This Season: (REQUIRED)**

(Circle all that apply)

**Girls: Var Asst JV Frosh Jr Hi Elem**

**Boys: Var Asst JV Frosh Jr Hi Elem**

**AD Official Retired Other**