



BASKETBALL COACHES ASSOCIATION of MICHIGAN

INDIVIDUAL MEMBERSHIP FORM

“BCAM Membership Year” is AUG 1 – JULY 31
Last day we will accept memberships for the school year: FEB 15

****Register and Pay Online instead at www.bcam.org beginning Aug 1****

MEMBERSHIP OPTIONS: (Select ONE)

• **\$80 School Membership (Both Genders)** – BOTH head varsity coaches and up to 13 other coaches/assistants/AD at one school or college. **Do not use this form. Use “School Membership Form” found at www.bcam.org.**

• **\$40 School Membership (Single Gender)** – ONE head varsity coach and up to 7 more coaches/assistants/AD who are coaching teams of the same gender at one school or college. **Do not use this form. Use “Single Gender School Membership Form” found at www.bcam.org.**

\$25 Head Varsity Coach Membership – Single membership for a head varsity coach at a high school or college.

\$10 Individual Membership – Single membership for everyone else except head varsity coaches.

\$0 Lifetime Membership Update – Only for CURRENT lifetime members - we do not sell new lifetime memberships. All current lifetime members must update their contact and coaching info yearly or they will fall off our mailing list.

** All membership types will receive memberships into: **BCAM**, **MHSCA**--Michigan High School Coaches Association, and **NHSBCA**--National High School Basketball Coaches Association

COACHING LEVEL: (for THIS Season ONLY) REQUIRED! (Check All That Apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Boys’ HS Head Varsity | <input type="checkbox"/> Men’s College Head Coach | <input type="checkbox"/> Not Currently Coaching |
| <input type="checkbox"/> Girls’ HS Head Varsity | <input type="checkbox"/> Men’s College Assistant Coach | <input type="checkbox"/> Athletic Director |
| <input type="checkbox"/> Other Coaches (actively coaching)
(includes Varsity Assistants, JV, Frosh, Jr Hi, Elem) | <input type="checkbox"/> Women’s College Head Coach | <input type="checkbox"/> Retired |
| | <input type="checkbox"/> Women’s College Assistant Coach | <input type="checkbox"/> Other |

Name _____ School Name _____

Email (**REQUIRED**) _____ HS Basketball Division? 1 2 3 4

Mailing Address: _____ Basketball League/Conference _____

City: _____ Zip: _____ Phone: (____) _____

****If no individual, valid email address is given, member will NOT receive BCAM Newsletters or be able to vote in any BCAM elections.**

COACHING WINS:

- Awards given for every 100 wins “VARSITY CENTURY CLUB” • Number of Head Varsity Basketball Wins = _____
- Wins as an “assistant coach” do not count “CENTURY CLUB” • Number of Head Non-Varsity Basketball Wins = _____

Mail form and payment to: **NOTE NEW MAILING ADDRESS!!!**

BCAM – Amy Heydenburg
1644 W. Stanton Rd
Stanton, MI 48888

BCAM Message Phone (989) 486-3625
WEBSITE: www.bcam.org
E-MAIL: secretary@bcam.org