

# *2010- 2011 Membership Form*

## **Basketball Coaches Association of New York, Inc.**

**BCANY Tax ID# 16-1612331**

Instructions:

1. Use this side of the form if only one coach is joining.
2. Put additional names on the reverse side. **NEED EMAIL ADDRESS OF EACH COACH**
3. For "Section" on the membership form, put the NYSPHSAA section your school is in OR PUT THE NUMBER THAT FITS YOUR SCHOOL.: Section 12: NYC Public Schools, Section 13: NYC Catholic Schools, Section 14: NYC + NYS Private Schools, Section 15: College Division II and III, Section 16: College Division I, Section 17: Junior College, Section18: Other

**\*\*Email:** ALL communications from BCANY will be by email. We must have an accurate email address. **(PLEASE PRINT CLEARLY).**

We prefer you use a home email address so that you will receive emails even when school is not in session. If you do choose to use a school email address please understand that your school's internet security system might view it as spam as it will have pictures and or graphics and kick it back. If possible let your school's internet person know that if it has "BCANY" in the subject line, it is not spam.

New     Renewal    **BCANY 2010-2011 Membership Form**

**Please print Clearly/Legibly**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**\*\*EMAIL:** \_\_\_\_\_

School \_\_\_\_\_ Section \_\_\_\_\_

**Please Circle:** Boys Coach    Girls Coach    Men's College Coach    Women's College Coach

**Please Circle:** Head Coach    Ass't Coach    JV Coach    Modified Coach    Other \_\_\_\_\_

Membership Category and Fee:

\$30.00: Head Coach

\$15.00: Scholastic Ass't, JV, Modified, College Assistant

\$15.00: Associate – AAU coaches, family, friends, fans, college students, etc.

Free: Retired coaches who were active members for at least 5 years.

\$70.00: Staff Rate (see below)

\$99.00: School Special (Entire Boys and Girls Staffs)

**Example:**

\$30.00: Head Coach

\$45.00: Head Coach and 1 Assistant

\$60.00: Head Coach and 2 Assistants

\$70.00: Head Coach and 3 or 4 Assistants

**BCANY Tax Identification Number 16-1612331**

**Make checks payable to: BCANY**  
**Mail completed form and payment to:**

Dave Archer, BCANY

524 Dickson Street, Endicott, NY 13760

New    Renewal                      **BCANY 2010- 2011**                      Membership Expires August 31, 2011

**Please print clearly**  
Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
\*\*EMAIL: \_\_\_\_\_  
School \_\_\_\_\_ Section \_\_\_\_\_

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