

Lone Star Coaching Clinic
February 12-14, 2021
Virtual Presentation

CLINIC REGISTRATION

Name _____ e-mail _____

Name _____ e-mail _____

Name _____ e-mail _____

Name _____ e-mail _____

Name _____ e-mail _____

School: _____

Address: _____

City: _____ State: _____ Zip: _____

Enclosed is my Check (@ \$75 per coach) for \$ _____ covering _____ Coaches. (*Lone Star 2021 web*)

Make Check payable to: Lone Star Coaching Clinic

Mail registration form and check to:

Lone Star Coaching Clinic
1404 Strada Curva
New Braunfels, TX 78132