

# SOUTH DAKOTA WRESTLING COACHES ASSOCIATION

## MEMBERSHIP FORM

**This form must be printed off, completed and mailed with a \$15 check to:**

John Latham. You must also be a member of the SD High School Coaches Association. Contact [Jim.Dorman@k12.sd.us](mailto:Jim.Dorman@k12.sd.us) or visit the SDHSCA website.

**Make Checks Payable to: SDWCA**

Name \_\_\_\_\_

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

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

Your School \_\_\_\_\_

School Address \_\_\_\_\_

Your Email \_\_\_\_\_

Check one: Head Coach \_\_\_\_\_ Assistant Coach \_\_\_\_\_ Youth Coach \_\_\_\_\_

**Send \$15 check to:**

John Latham  
PO Box 18  
Camp Crook, SD 57724

**Make Checks Payable to: SDWCA**