



2009 CSCAA Convention & Clinic

May 21 – 24, 2009 · Chicago, Illinois

Hotel- Doubletree Magnificent Mile

300 East Ohio Street, Chicago, IL 60611

ROOM RATES: \$159 (Cut-off date for above rates: April 23 or until room block is sold)

Call Hotel Directly for Room Reservations: 312-787-6100

(Mention the College Swimming Coaches Association convention for above room rate)

Registration and Invoice

Schedule: Registration- Thursday, May 21, 2009

Clinic program runs May 21, 22, 23 (Thursday, Friday, Saturday). Depart Sunday, May 24, 2009

Please fill out the registration form below. Return to address noted on bottom of form.

Registrant's Information

NAME _____

UNIVERSITY/COLLEGE _____ NCAA DIV _____

POSITION/TITLE _____

ADDRESS _____ ST _____ ZIP _____

PHONE # (office/Cell) _____ / _____

E-MAIL _____

Method of Payment

Registration Fees: Members: \$180 until April 23, 2009; \$200 after April 23, 2009

VISA _____ MasterCard _____ CHECK _____ *(We do not accept AmEx)*

Name on Card _____

Address on Card _____ City _____ ST _____ ZIP _____

Credit Card # _____ Expiration _____

Return this completed form by mail or fax to:

Matt Hooper, CSCAA/ASCS
 5101 NW 21st Ave., Suite 200
 Fort Lauderdale, FL 33309
 Fax: (954) 563-9813 E-Mail: CSCAA@swimmingcoach.org

Or go the web address below and register and pay online:

<https://www.clubassistant.com/club/clinics.cfm?c=181>

Please indicate here if you need a roommate for the Clinic. We will notify others of a similar need.

_____ I will need a roommate. _____ Male Female _____

Please indicate here if you will need American Red Cross re-Certification at the Clinic, Or CSCAA Coaches' Education

Coaches' Safety _____ CPR _____ First Aid _____

Coaches' Education (CSCAA program) _____