



# INTERSCHOLASTIC SAILING ASSOCIATION

Founded in 1930

(DISTRICT)

## 2004-2005 MEMBERSHIP FORM and DUES INVOICE

There is only one type of school membership in the Interscholastic Sailing Association (ISSA): all school members belong to both a District Association and to ISSA, the National Association. All school members have voting privileges in ISSA, and are eligible for all national championships.

**MAIL COMPLETED FORM AND CHECK FOR DUES TO THE ADDRESS AT THE BOTTOM OF THIS PAGE**

DATE: \_\_\_\_\_

DISTRICT MEMBERSHIP DUES ..... \$ \_\_\_\_\_

NATIONAL (ISSA) MEMBERSHIP DUES ..... \$ **75.00**

**TOTAL DUE** ..... \$ \_\_\_\_\_

SCHOOL NAME IN FULL: \_\_\_\_\_

SCHOOL ADDRESS: (STREET) \_\_\_\_\_

(CITY/TOWN) \_\_\_\_\_ (STATE) \_\_\_\_\_ (ZIP) \_\_\_\_\_ - \_\_\_\_\_

SCHOOL PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ — \_\_\_\_\_ FAX ( \_\_\_\_\_ ) \_\_\_\_\_ — \_\_\_\_\_

SCHOOL E-MAIL ADDRESS: \_\_\_\_\_

NAME OF ADULT: (CHECK ONE)  COACH  ADVISOR \_\_\_\_\_

ADDRESS (IF DIFFERENT FROM SCHOOL): \_\_\_\_\_

(CITY/TOWN) \_\_\_\_\_ (STATE) \_\_\_\_\_ (ZIP) \_\_\_\_\_ - \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ — \_\_\_\_\_ FAX: ( \_\_\_\_\_ ) \_\_\_\_\_ — \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

MAKE DUES CHECK PAYABLE TO DISTRICT: \_\_\_\_\_

### SEND ALL CHECKS, MAIL AND REGATTA INFORMATION TO:

DISTRICT'S Secretary/Treasurer's NAME : \_\_\_\_\_

DISTRICT ADDRESS: (STREET) \_\_\_\_\_

(CITY/TOWN) \_\_\_\_\_ (STATE) \_\_\_\_\_ (ZIP) \_\_\_\_\_ - \_\_\_\_\_

DISTRICT E-MAIL ADDRESS: \_\_\_\_\_

**PLEASE COMPLETE QUESTIONNAIRE ON REVERSE SIDE OF THIS SHEET**

**A Supporting Member of the United States Sailing Association (US SAILING)**

*The INTERSCHOLASTIC SAILING ASSOCIATION is dedicated to the nationwide promotion of sailing as a sport among secondary school sailors, to the formation of school sailing teams, and to the organization of school sailing competition*

**PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT YOUR SAILING PROGRAM.**

THIS INFORMATION WILL BE USED IN THE ISSA MEMBERSHIP DIRECTORY/YEARBOOK:

**STATUS OF SCHOOL SAILING PROGRAM:**  VARSITY SPORT  CLUB  OTHER

(IF "OTHER," PLEASE EXPLAIN ) \_\_\_\_\_

**SCHOOL OFFICIALS:**

PRINCIPAL OR HEADMASTER: \_\_\_\_\_

DIRECTOR OF ATHLETICS: \_\_\_\_\_

**DETAILS OF SAILING PROGRAM:**

COACH(ES): \_\_\_\_\_

ADVISOR(S): \_\_\_\_\_

WE USUALLY SAIL AT: \_\_\_\_\_  
(NAME OF SAILING FACILITY)

USING THESE CLASS(ES) OF BOATS: \_\_\_\_\_

TEAM CAPTAIN(S): \_\_\_\_\_

**LIST ALL THE NAMES OF CLUB/TEAM MEMBERS:**

*(Note: For any team members who wish to receive their own copies of the ISSA Newsletter, please include \$5.00 per subscription and provide member's complete mailing address.)*

name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____
name _____	grad year _____	name _____	grad year _____

PLEASE USE ADDITIONAL SHEETS IF NECESSARY FOR COMPLETE ROSTER AND FOR ADDRESSES FOR ADDITIONAL NEWSLETTERS AT \$5.00 PER SUBSCRIPTION PER YEAR