



Basketball Coaches Clinic

in memory of Danny Craige

Sunday, September 26, 2010 • Germantown Academy

Registration Form

Name _____

Address _____

School or Program(s) that you coach _____

Phone _____ Email Address _____

*** If this registration form is for several individuals, please list their names in the space provided:

1.) _____ 2.) _____

3.) _____ 4.) _____

5.) _____ 6.) _____

FEES : \$50 per person — if received prior to September 19, 2010
\$60 per person — if registering at the door

** Checks made payable to: Germantown Academy Basketball

Please send this form to : Jim Fenerty
c/o Germantown Academy
P.O. Box 287
Fort Washington, PA 19034

For Directions to Germantown Academy, go to www.germantownacademy.net