

Academic Year 2018 – 2019

CALIFORNIA HIGH SCHOOL SPEECH ASSOCIATION
ASSESSMENT STATEMENT

Name of School _____ School Phone () _____

Address _____ FAX () _____

City _____ CA, ZIP _____

Speech League (Circle One)

Area I	Area II	Area III	Area IV
CFL GGSA	CapVFL SoVFL YFL	SCDL TCFL WBFL	CBSR OCSL SDIVSL

Name of Instructor _____ Cell/Home Phone () _____

E-Mail _____

Instructions:

1. Fill out this form completely. The amount due is \$100.
2. Get principal signature. Make three copies of form. *Principal agrees that the coach named above may act as a representative of his/her school.*
3. Get school check or money order made out to **California High School Speech Association. Make Sure the school's name appears on the check. Do not put the Area Chair's name on the check.** If you need to give the form to your financial manager, give them one copy and request that the check be given to you. Do not have financial manager mail the form. Alternatively, you may pay by credit card at <http://square.chssa.org> (\$3.00 credit card fee applies). Select CHSSA Dues. Where it says, "Select an option," select your league. Make sure to include school name in the box above the green "Place Order" bar.
4. Mail two copies of the signed form with the check to the Area Chair below.
5. If your league president requests it, mail the last copy to your league president

A \$20.00 delinquent fee will be charged to schools paying assessments after December 1. Fees paid after December 1 must be sent via certified mail or credit card. All fees must be paid on or before two weeks prior to the first State Qualifying Contest

Please use only the current year's form. Sending your assessment to the wrong address could subject your assessment to the \$20.00 Delinquent fee even if it was originally mailed before the deadline. The current form and current area chair contact information are available at www.cahssa.org

Make checks payable to: **California High School Speech Association.**

No personal checks shall be accepted. School checks, credit cards or money orders only shall be accepted. *I agree to advise the CHSSA, in writing, of any changes to the above information.*

Coach's Signature

Principal's Signature

Area I Chairperson	Area II Chairperson	Area III Chairperson	Area IV Chairperson
Chris Harris Saratoga High School 20300 Herriman Ave Saratoga, CA 95070-4999	Mikendra McCoy Mountain House H.S. 1090 S. Central Parkway Mountain House, CA 95319	Kathy Graber 17156 Nanette Street Granada Hills, CA. 91344	Sarah Sherwood 15060 Sandalwood Lane Chino Hills, CA 91709