



California High School Speech Association
Assessment Form
2018-2019

Instructions:

1. Fill out this form completely. The amount due for annual membership is \$100. Please make all checks or money orders payable to the California High School Speech Association. *We do not accept personal checks.* You may pay by credit card at <http://square.chssa.org> (processing fees apply). **There is a \$20 late fee for all dues received after December 1st.**
2. Get your Principal's signature. The Principal agrees that the coach named below may act as a representative of their school.
4. Mail the signed form *with the check* to your Area Chair. Keep a copy for your records.

Name of School: _____ School Phone: _____

Mailing Address: _____

Please select **1** league below:

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|---------------|-----------------------------------|---------------------------------|---|
| Area 1 | Golden Gate Speech Association | Coast Forensic League | |
| Area 2 | Capitol Valley Forensic League | Southern Valley Forensic League | Yosemite Forensic League |
| Area 3 | Southern California Debate League | Tri-County Forensic League | Western Bay Forensic League |
| Area 4 | Citrus Belt Speech Region | Orange County Speech League | San Diego Imperial Valley Speech League |

Name of Head Coach: _____ Cell Phone: _____

Head Coach Email Address: _____

Please answer the following demographic questions based on estimates for the current competitive year

Type of school: Public Private Charter Other (please explain) _____

Approximate Team Size: 0-10 10-25 25-50 50-100 100-200 200+

Is your school Title 1: Yes No I don't know

We agree to advise the CHSSA, in writing, of any changes to the above information.

Coach Signature

Principal Signature

Date

Area 1 Chris Harris 10168 Foothill Blvd Oakland, CA 94605	Area 2 Mikendra McCoy 1090 S. Central Parkway Mountain House, CA 95319	Area 3 Kathy Graber 17156 Nanette Street Granada Hills, CA 91344	Area 4 Sarah Sherwood 15060 Sandalwood Lane Chino Hills, CA 91709
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