



California High School Speech Association
Assessment Form
2019-2020

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:

- 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 95391	Area 3 Jennifer Nguyen 18844 Altario Street La Puente, CA 91744	Area 4 Don Etheridge c/o MVHS 1306 Melrose Drive Oceanside, CA 92057
---	--	---	--