

2024 MIGCA INDIVIDUAL MEMBERSHIP FORM

NAME OF SCHOOL: _____

COACH # 1: NAME _____

ADDRESS _____

CITY _____ ZIP CODE _____

EMAIL _____ PHONE _____

COACHING POSITION _____

NOTE: You may complete this process completely online by clicking **Become A Member** on the top left of www.migca.org. This form is for those who wish to send a **check for \$50 Payable to MIGCA** via traditional mail. Please mail form and payment to :

MIGCA
c/o ANDY GRILE
1273 SCOTT CREEK DRIVE
BELMONT, MI 49306