NHSSOA/NSAA BASKETBALL

OFFICIALS’ CLINIC

The Nebraska High School Sports Officials Association in conjunction with the Nebraska School Activities Association will sponsor and conduct basketball officiating clinics in each of the six districts. Listed below are sites and dates. Officials, please be on time and come ready to officiate. Black pants are not required, please bring whistle and shirt .

Wednesday, June 13, 2012 Monday, June 18, 2012 Thursday, June 21, 2012

District 1 Basketball Clinic District 6 Basketball Clinic District 2 Basketball Clinic

Location: Lincoln Northeast HS Location: Sidney HS Location: Fremont HS

Registration: 4:30-5:00pm Registration: 2:30-3:00pm (MT) Registration: 4:00-4:30pm

Saturday, June 23, 2012 Thursday, June 28, 2012 Saturday, June 30, 2012

District 5 Basketball Clinic District 4 Basketball Clinic District 3 Basketball Clinic

Location: McCook HS Location: Grand Island HS Location: Norfolk Catholic HS

Registration: 8:00-8:30 am Registration: 9:30-10:00am Registration: 8:30-9:00am

Make checks payable to NHSSOA

Mail to:

*Chris Carlson*

*55052 873 Rd*

*Wausa, NE 68786*

*chris.carlson@cvacoop.com*

Complete the registration form with all the necessary information **and enclose payment of $15.00 for a paid member of the NHSSOA or $35.00 for a non NHSSOA member**. The fee is non-refundable. Please return application 2 weeks prior to date of clinic attending. *Walk-ins are welcome on the day of clinic*!

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List names of attendees with whom you prefer

City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to work with as a crew.

Telephone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\* Non-Refundable Registration Fee*