

**CENTRAL OFFICIALS ASSOIATION  
LOYOLA ACADEMY CAMP/CLINIC**

Official name: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Circle one:           Level 1    or    Level 2

Classroom Session: Sunday, June 9, 2019 1:00 pm (***Mandatory attendance***)

Game dates/times, please indicate your preferred choice; 1 = first choice, 2 = optional choice:

Monday, June 10 5:00 pm – 9:00 pm

Wednesday, June 12 5:00 pm – 9:00 pm

Monday, June 17 5:00 pm – 7:00 pm

Wednesday, June 19 5:00 pm – 9:00 pm

Specific Assignor(s) you want to see you work? \_\_\_\_\_

**Camp/Clinic fee**

In advance: COA Member: \$20 and non-COA member \$30.

Walk up or day of class room: \$30 COA member and \$40 non-COA member.

Make check payable to Mike Luzzi or pay via Zelle QuickPay

Mail form and payment to: **Mike Luzzi % COA**  
**6921 W. Hobart**  
**Chicago, IL 60631**