

IHSA Certified Clinic Application

This application must be accompanied by any materials used to promote the clinic. This could include items like flyers/brochures, emails, or web links. The completed application and promotional materials must be turned into the IHSA Office no later than 30 days before the start of the clinic. Requests made less than 30 days may not be approved. The fields in this form will accept a cursor and can be filled out prior to printing.

Sport	Clinic Location		
Contact Name	Association/Organization Affiliation		
ID #	Clinic/Camp Dates		
Contact Email	Clinic Time	Level 1 Clinic	Level 2 Clinic
Contact Phone	Clinic Cost (Assoc. Member)	Clinic Cost (Non-Member)	

Targeted Experience Level Approximate # of Attendees: Level 1 Level 2

IHSA Certified Clinicians

- | | |
|----|------|
| 1. | ID # |
| 2. | ID # |
| 3. | ID # |
| 4. | ID # |
| 5. | ID # |

Clinic Staff (must be on staff for duration of clinic)

- | | |
|----|------|
| 1. | ID # |
| 2. | ID # |
| 3. | ID # |
| 4. | ID # |
| 5. | ID # |

Level 1 Required Topics

1. Professionalism
2. Pre-Game Conference (classroom)
3. General Game Mechanics (classroom and/or on-field)
4. Conflict Resolution
5. 2-Person/3-Person (PowerPoint Presentation)
6. Video Clip Review
7. Conclusion, Attendance, Evaluation

Time Allotment (mins):

Total Time Allotment for Required Topics:

Level 2 Required Topics

1. Conflict Resolution
2. Mechanics
3. Sport-specific Level 2 PowerPoint
4. Video Clip Review
5. Game/Management (if Basketball - Minimum 3-person games worked required)

Total Time Allotment for Required Topics:

Optional Topics

1. Fitness Preparation, Testing
2. Assignments
3. On Field/Court Time
4. Preventative Officiating
5. Review State Terms & Conditions
6. Misc. Items (please specify)

Total Time Allotment for Required Topics:

Total Time for Clinic:

Submitted by (signature)

Date

