

# OFFICER INFORMATION

Club Name:

<b>President Name:</b> Email: Phone #: Address:	<b>Alternate Information</b> Email: Phone #:
<b>Vice President Name:</b> Email: Phone #: Address:	<b>Alternate Information</b> Email: Phone #:
<b>Secretary Name:</b> Email: Phone #: Address:	<b>Alternate Information</b> Email: Phone #:
<b>Treasurer Name:</b> Email: Phone #: Address:	<b>Alternate Information</b> Email: Phone #:

Club Website:
Club Facebook (if applicable):
Club Email:

Practice Location:
Time:

Meeting Location:
Time:

Membership System	Sign Up		Tryouts	Other
Membership Fees	Yes	No	Amount:	
National Governing Body	Yes	No	Name:	
Membership Fees	Yes	No	Amount:	
League/Conference	Yes	No	Name:	
Membership Fees	Yes	No	Amount:	



**CAMPUS  
RECREATION**

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