

CLUB SPORT APPLICATION

The University of Arizona Department of Campus Recreation Application for Arizona Collegiate Club Sport Federation

Complete Club Name:

Main Contact Person:

Title:

Phone:

E-mail:

Club Website Address:

Club Facebook Address:

Number of interested members:

Need experience? Yes No Try-outs? Yes No

Amount of Club Dues: per: semester month year

Annual Club Budget: Annual amount of fundraising:

This club is seeking to be categorized as: (see handbook for definition of tiers)

Cactus

Sunset

Desert

If competitive, the main competition season is (check one): Fall Spring

Please do not abbreviate the following information. List complete name of a national association and/or league.

Club Sport National Governing Body:

League Affiliation:

List all colleges that are members of this league:



CAMPUS RECREATION

1400 E. 6th Street
P.O. Box 210117
Tucson, Arizona 85721
campusrec.arizona.edu

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Purpose/Description of Club Sport (reason for formulation):

List of Officers

President: Phone e-mail

Vice-president: Phone e-mail

Treasurer: Phone e-mail

Advisor: Phone e-mail

Department:

Coaches

Head Coach: Phone e-mail

Asst. Coach: Phone e-mail

Asst. Coach: Phone e-mail



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