

LEWIS UNIVERSITY

Club Sports

New Club Application Form

Please Submit to Jill Siegfried at siegfrji@lewisu.edu

Name of New Club: _____

President's Name: _____

President's Email: _____

President's Phone Number: _____

Moderator/Advisor/Coach: _____

Moderator/Advisor/Coach phone: _____

Date Completed: _____

Please check off the Following that have been completed:

- Registered as Student Organization with the Division of Student Services
- Designated Team Officers

Vice President: Name: _____
Email: _____

Treasurer: Name: _____
Email: _____

Secretary: Name: _____
Email: _____

Council Rep: Name: _____
Email: _____

- Able to Identify feasible options for practice, games, competitions, etc.

List Colleges/Universities/Community Groups:

Club/ National Governing Body:

Other:

- Will charge team dues **Amount:** _____

Average Number of Members for Club: _____

**Please explain why your organization would like to become a Club Sport
and the benefits to the community.**

**Please provide the name of which facility/space you will be needing for practice/games.
How often?**

**Please describe your project income, operating costs and possible ways to generate funds.
(Please complete Projected Budget Form and attach as well.)**

Please identify the risks associated with your group: