

INDIANA UNIVERSITY SOUTHEAST

CLUB SPORTS

Approval Application

Club Name: _____

Sport Involvement: _____

Advisor Name & Contact Info: _____

(Name)

(Phone #)

(Email)

(Campus address/ local address)

(State)

(Zip Code)

Club Representative Name & Contact Info: _____

(Name)

(Phone #)

(Email)

(Local address)

(State)

(Zip Code)

Who will the club sport compete against (leagues/tournaments): _____

Where will the club sport practice and hold home events/tournaments: _____

How will the club sport propose a budget and how will expenses be met: _____

Who is eligible to be a member of the club sport: _____

Action (check one): **Approved** _____ **Not Approved** _____ (explain)

Comments:

Indiana University Southeast Club Sport Membership Form

Club: _____

Name (Last, First): _____ Date of Birth: _____

Student ID Number: _____ Year in School: _____

School Address: _____

City

State

Zip

Email Address: _____

Phone Number: _____ Cell Phone: _____

Type of Membership: (check): Student _____ Faculty & Staff _____ Coach _____

Parent Name (Last, First): _____

Permanent Address (If different from school): _____

City

State

Zip

Personal Medical Information

Do you have medical insurance? Yes _____ No _____

Insurance Company Name: _____ Group Number: _____

Policy Holder's Name: _____ Policy Number: _____

Emergency Contact: _____ Emergency Contact #: _____

Allergies: _____

Take Medications? Yes _____ No _____

If so, name them: _____

Medical Problems/Conditions: _____

*All information on this form is current and correct to the best of my knowledge.

**I authorize the Intramural & Fitness Center Coordinator and Indiana University Southeast to contact my parents or my emergency contact in case of an emergency.

Signature: _____ Date: _____

Indiana University Southeast Club Sports

Club Sports Advisor Form

I, _____ (print), serving in the capacity of Advisor for
the _____ Club Sport at Indiana University Southeast, recognize,
understand, and accept the responsibility of all the club sport members and the Indiana University Southeast
policies and procedures concerning club sports.

I also certify that I am a full-time Faculty or Staff member at Indiana University Southeast.

Signed: _____ Date: _____

Name: _____ Club Sport: _____

Campus Address: _____

Phone: Office: _____ Home: _____

Email: _____

Club Sport President: _____ Date: _____

(Signature)

Club Sport Vice President: _____ Date: _____

(Signature)

For Office Use Only:

Advisor Form Received: Date: _____

Approval Date: _____

Comments: _____

Indiana University Southeast Club Sports Coach/Instructor Application

Club Sport: _____ Date: _____

Name: _____ Home Phone: _____

Home Address: _____
City State Zip

Work Phone: _____

Cell Phone: _____ Social Sec. No.: _____

Email Address: _____

Coaching/Playing Experience: (attaching resume is acceptable)
(Include dates, address, phone numbers, job titles held, awards, certifications, etc...)

Reference:

Name: _____ Address: _____ Phone: _____
Name: _____ Address: _____ Phone: _____
Name: _____ Address: _____ Phone: _____

I understand that my relationship to Indiana University Southeast with regard to the coaching/instructing provided to the club sport will be that of a volunteer and that I will not be provided with any compensation. I acknowledge that all of the above information is correct and true on this coach/instructor application. I understand that Indiana University Southeast and the Intramural & Fitness Center Coordinator may investigate the information provided. Any false information included on this application can lead to withdraw and being terminated of the coach/instructor position.

Signature: _____ Date: _____

Office Use

Interview Date: _____ Interviewer Name: _____

Interviewer Comments:

INDIANA UNIVERSITY SOUTHEAST CLUB SPORTS

Rules Form

Club Name: _____

Sport: _____

Anticipated Competition: _____

Eligibility Rules for Club Sport Members: _____

Specific Sport Eligibility Rules: _____

Please Read

Understand not all club members are required to compete: in fact, some associations or league requirements prohibit certain club members from doing so. For example, part-time students, staff and graduate students may not be eligible to compete in intercollegiate competition. Each club is responsible for knowing its own association/league regulations and for ensuring that it is meeting those regulations. All club members are eligible to participate in club training sessions and other activities not specifically regulated by the club's association/league rule.

I _____ (print) have read and understand all information provided on the rules form.

_____ (sign) _____ (date)