



OLD DOMINION UNIVERSITY
RECREATIONAL SPORTS DEPARTMENT
1015 W. 47th Street

APPLICATION FOR BECOMING AN ODU SPORT CLUB

1. Name of the organization, and commonly used abbreviations.

2. List the *Organizational Representative(s)* who can be contacted:

Name:
Address:
UIN#:
Contact Number:

Name:
Address:
UIN#:
Contact Number:

Name:
Address:
UIN#:
Contact Number:

3. Clearly describe the purpose of your organization.

4. Provide a summary of programs/activities and other anticipated club involvement.

5. List the anticipated number of members for the club including staff, faculty and students. _____ (*Note: An appropriate number of enrolled students, staff, and faculty members of Old Dominion University must be signed up in order to be considered a Sports Club. Students must have at least 6 credit hours and health insurance.*)

	NAME (print)	UIN#	SIGNATURE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

NAME (print)

UIN#

SIGNATURE

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

15. _____

16. _____

17. _____

18. _____

19. _____

20. _____

6. We certify that:

- a. All information on this sheet is accurate.
- b. We will notify Recreational Sports of any change in information.
- c. This organization will not utilize discriminatory practices based upon race, religion, national origin, gender, or handicap.
- d. We will comply with all *Old Dominion University* policies regarding sport club conduct. We will inform all other members of this organization of these policies.

Signatures of at least three of the names listed:

_____ (sign) _____ (date)

Recreational Sports Director's Signature: _____

Dr. R. Kevin Marbury, Director



For office use only

Approved _____ Denied _____ Date of Approval _____

Reason for Denial _____