



UNT Sport Clubs Program Sport Club Application

Date: _____

Please complete and submit to Assistant Director of Sport Clubs.

Name of Club:	
Student Leader:	Phone:
Local Address	Alternate Phone:
E-mail Address:	Permanent Address
Alternate Leader	Phone:
Local Address	Alternate Phone:
E-mail Address:	Permanent Address

Faculty Advisor:	
Department:	Phone:

Approximate Number of Members: _____ Males _____ Females

Do you plan on requesting funding? _____ Yes _____ No

What do you plan to purchase with the funds? _____

Please list any previous experience(s) with this club and/or the sport club program in general either at this university or another. _____

Sport Club Web-site _____

Have you completed the Student Activities Organization Registration on-line?

_____ Yes _____ No