University of New England
NEW CLUB SPORT APPLICATION

Person completing this form:
Name: ____________________________________________________________________
Address: __________________________________________________________________
Email address: __________________________________________________________________
Year in School: __________________________________________________________________
Phone Number: (        ) ____________________________________________________________________

Type of Club: ______________________________ Men Women or Coed (circle)

Why would you like to have this club on campus? Explain: ____________________________________________________________________

Facilities needed: ____________________________________________________________________

Equipment needed: ____________________________________________________________________

Will the club be competing against other colleges/universities or are you registering as a
recreational club? Explain: ____________________________________________________________________

If yes, indicate the colleges, universities and/or club teams in the area that you will be
competing against (i.e. USM, Colby-Sawyer, Bates, Bowdoin, etc).

Prospective Coach:
Name: __________________________ Phone __________________________

Email address ____________________________________________________________________

Prospective Advisor:
Name: __________________________ Phone __________________________

Email address ____________________________________________________________________

Budget Information (Provide estimates for the following)
1. Equipment Expenses (uniforms, balls, mats, etc.) List the items and provide approximate
costs:
                                                                                       ____________________________________________________________________
                                                                                       ____________________________________________________________________
                                                                                       ____________________________________________________________________
2. Facility Rental Fees (location and approximate costs):

____________________________________________________________________________

____________________________________________________________________________

3. Travel Information (lodging, gas, vehicle rental):

____________________________________________________________________________

____________________________________________________________________________

4. Entry or tournament fees (breakdown per tournament and estimate the number of tournaments per academic year)

____________________________________________________________________________

____________________________________________________________________________

5. Officials, coaches/advisor – enter the cost and number of each required. (include EMT or any emergency personnel)

____________________________________________________________________________

____________________________________________________________________________

6. If applicable, list the national governing body affiliated with your sport. Provide the email address and phone number

____________________________________________________________________________

____________________________________________________________________________

7. If applicable, what are the league or association dues per year and/or per participant?

____________________________________________________________________________

____________________________________________________________________________

8. How do you plan to supplement your budget? (ie. fundraisers, dues, donations, etc). Indicate approximate income from each.

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Attach the following items to this completed application:
- Schedule of number of practices and games, include dates
- Roster of 10-15 currently enrolled students willing to support your club (include name, student ID and year in school)

Verification of acceptance:

Patty Williams: ________________________________ Date: ________________
Assistant Director of Athletics for Club & Intramural Sports, pwilliams2@une.edu, CC 100B