

NEW SPORT CLUB APPLICATION

1. Complete this application
2. Submit application to: **Sport Clubs Coordinator, Recreational Services, Student Recreation Center, Suite 200**
3. Schedule a meeting with the Sport Clubs Coordinator to discuss application.
4. The proposed sport club shall meet the following criteria:
 - Must have a minimum of 8 students to start the club.
 - It shall NOT duplicate the style of an existing sport club at Georgia State University or conflict with other program(s) offered within the Department of Recreational Services at Georgia State University.
 - Must have the method of competition within a reasonable geographic area.
 - The initiative of starting the sport club should be toward the form of competition.
 - Must have provisions of longevity and growth.
 - It shall be fulfilling a student need.
 - Suitable on-campus and off-campus facilities are available where the club can meet, practice and potentially host competitions.
 - Must be financially self-reliant and operate that way during a one year period before funding is made available to the club.
5. After the meeting and approval is gained by the Sport Clubs Coordinator the proposed sport club must complete the Student Organizations process via: <https://abc/32900/forms/20881>
6. Once the Student Organizations process is completed the proposed sport club will take an active status as Georgia State University chartered student organization and be categorized as an official sport club within the Department of Recreational Services.

Name of Applicant: _____

Club Contact: _____

GSU Email: _____

Contact Phone #: _____

Student Status:

Freshman ___ Sophomore ___ Junior ___ Senior ___ Grad _____

Purpose of the Club:

What types of facilities are required for this Sport Club:

List equipment that might be required for this Sport Club:

List leagues and potential competitions/opponents that would be available to this Sport Club:

Please include all students who are interested in being part of this Sport Club (must have a minimum of 8 students).

| # | Name | GSU Email | Year in School |
|---|------|-----------|----------------|
| 1 | | | |
| 2 | | | |

| | | | |
|----|--|--|--|
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |

Office Use Only

Date Received_____ Meeting Date_____

Approved through the Office of Recreational Services Y_____ N_____

Approval Date:_____