



ORGANIZATIONAL/CLUB MEMBERSHIP APPLICATION

FOR ASSOCIATION USE ONLY

Date Rec'd _____

Check# _____ Amt \$ _____

of Membership Years _____

Membership Year(s) _____

Assoc. # _____ Club _____

HY-TEK Short Abbrev _____

Approved By _____

Date Approved _____

ORGANIZATION INFORMATION

*Organization Name _____

Principal Location of the Organization _____

*City _____ *ST _____ Zip _____

*Website Address _____

Type of Organization	*Age Demographics	Sports	
<input type="checkbox"/> Competitive Club	<input type="checkbox"/> Youth	<input type="checkbox"/> Track	<input type="checkbox"/> Field
<input type="checkbox"/> Event Organizer	<input type="checkbox"/> Masters	<input type="checkbox"/> Road	<input type="checkbox"/> XC
<input type="checkbox"/> Corporate	<input type="checkbox"/> Open	<input type="checkbox"/> Mountain	<input type="checkbox"/> Ultra
<input type="checkbox"/> Other		<input type="checkbox"/> Trail	<input type="checkbox"/> Race Walking

Check all that apply

CHECK ONE:

- New Membership
- Renewal from Last Year
- Renewal but not from Last Year
- Update Multi-year Membership



***\$100 late fee;
Renewal applications
received after May 1st
COMPETITIVE CLUBS
ONLY**

*Specified contact information will be posted on USATF website, www.usatf.org

CONTACT INFORMATION

All mail and e-mail correspondence from USATF will be sent to the following

Contact Person _____

Current USATF Individual Membership # _____ *Required to Access Club Management Area

Shipping/Mailing Address _____

City _____ ST _____ Zip _____

*Phone (Main)() _____ Phone (Alternate)() _____

*E-mail Address _____ Fax () _____

Officers:

_____ President	_____ Current USATF Membership #
_____ Secretary	_____ Current USATF Membership #
_____ Other	_____ Current USATF Membership #

Our organization, if accepted, hereby agrees to abide by the Rules and Regulations of USA Track & Field and to respect and enforce all decisions of USA Track & Field and its Associations.

Signature of Organization Officer _____

Date _____

Return this application form to:

PLEASE REGISTER OUR CLUB/ORGANIZATION FOR:

- 1 YEAR 2 YEARS
- 3 YEARS 4 YEARS

Fee = number of years X annual membership fee

NOTE: To maintain current contact information and to properly activate the liability insurance, clubs/organizations who apply for multi-year memberships **must** file a membership application, applicable coach's registration forms, and club practice schedule each year.

FOR NATIONAL OFFICE USE ONLY

Date Rec'd _____

Date Ent'd _____

Entered By _____ CC \$ _____

Check _____ Amt. \$ _____

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COMPETITIVE CLUBS ONLY**