



2012 BC Athletics Full Club Membership Application

- | | | |
|---|--|-----------|
| <input type="checkbox"/> New Application | First time club member in 2012 | \$ 84.00 |
| <input type="checkbox"/> Renewal (due December 31, 2011) | 5 - 19 members as of 8/31/2011 | \$ 84.00 |
| | 20 - 49 members as of 8/31/2011 | \$ 140.00 |
| | 50 to 99 members as of 8/31/2011 | \$ 224.00 |
| | 100 + members as of 8/31/2011 | \$ 280.00 |
| Or | | |
| <input type="checkbox"/> Update | Changes or additional information only | |

Please note the following information and club membership requirements:

- Club membership is valid from January 1st to December 31st each year. Renewals are due Dec. 31st.
- Keep club contact (mailing address, phone, fax, email, website) information current with BC Athletics.
- The BC Athletics office must be advised of any changes to the information submitted on this form.
- Incomplete forms will be returned. Complete all fields. Enter "n/a" where necessary. If needed use back page for additional information.
- HST is included. HST #127293264
- There must be at least 5 individual, first claim members in the club.
- All individual members of the club must hold a current BC Athletics Individual membership appropriate to their activities in the club or hold a current membership with another Provincial/Territorial or National Athletics Federation (as per BC Athletics, Athletics Canada and IAAF Rules).
- BC Athletics member clubs must sanction all events they organize/host/sponsor.
- For further information and requirements refer to the BC Athletics Operating Policies, Procedures, Rules and Regulations - Section 24 available on the BC Athletics website at www.bcatletics.org

Club Name: _____ **Colours:** _____

Club Mailing Address:	Club Invoicing Address: (if different from mailing address)
_____	_____
_____	_____
_____	_____
_____	_____

Club phone: (____) _____ **Club fax:** (____) _____

Email: _____ **Website:** _____

Geographical drawing area: _____

Is the club a registered Non-Profit Society with the Registrar of Companies, Prov. of BC? Yes No

The following acknowledgement is part of the membership application and must be completed & signed.

BC Amateur Athletics Association Acknowledgment of Club Membership Responsibilities.

Upon acceptance as a member club of BC Athletics, _____ **agrees to abide by the bylaws, rules and policies of BC Athletics and Athletics Canada.**
(club name)

Date (MM/DD/YY)

Signature of club President

Training Venue(s) - (Track & Field Stadiums, Schools, Parks, Community Centres etc.)		
Name:	Name:	Name:
Location:	Location:	Location:
Seasons:	Seasons:	Seasons:
Times:	Times:	Times:
Is your training facility shared with other athletics/sport groups? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If YES please give details: _____		

THE CLUB WILL PROVIDE PROGRAMS IN THE AREAS IDENTIFIED BELOW

<input type="checkbox"/> <u>TRACK</u>	<input type="checkbox"/> Long Jump	<input type="checkbox"/> Shot Put	<input type="checkbox"/> Pentathlon	<input type="checkbox"/> <u>ROAD RUNNING</u>	<input type="checkbox"/> <u>CROSS COUNTRY RUNNING</u>
<input type="checkbox"/> Sprints	<input type="checkbox"/> Triple Jump	<input type="checkbox"/> Discus	<input type="checkbox"/> Heptathlon	<input type="checkbox"/> <u>PARALYMPIC PARTICIPATION</u>	
<input type="checkbox"/> Hurdles	<input type="checkbox"/> High Jump	<input type="checkbox"/> Hammer	<input type="checkbox"/> Decathlon	<input type="checkbox"/> Wheelchair	<input type="checkbox"/> Blind
<input type="checkbox"/> 800M - 5000M	<input type="checkbox"/> Pole Vault	<input type="checkbox"/> Weight		<input type="checkbox"/> Amputee	
<input type="checkbox"/> 10000 - Marathon	<input type="checkbox"/> Walks	<input type="checkbox"/> Javelin		<input type="checkbox"/> Cerebral Palsy	
<input type="checkbox"/> Steeple Chase				<input type="checkbox"/> Intellectually Disabled	

EVENTS YOUR CLUB WILL HOST IN 2012

Date	Event	RR, T&F or XC

BOARD OF DIRECTORS AND CLUB EXECUTIVE

Complete all information requested for each individual. All individuals listed must hold a current BC Athletics Individual membership appropriate to their participation in the club.

PRESIDENT

Name:		BCA #
Address:		City: Postal Code:
Ph:	Fax:	Email:

VICE PRESIDENT

Name:		BCA #
Address:		City: Postal Code:
Ph:	Fax:	Email:

SECRETARY

Name:		BCA #
Address:		City: Postal Code:
Ph:	Fax:	Email:

