



# TRACK AND FIELD / ROAD RUNNING CROSS COUNTRY

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## 2009 APPLICATION FOR CLUB STATUS

NAME OF CLUB: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 PHONE DAY: \_\_\_\_\_ PHONE EVENING: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_  
 \_\_\_\_\_ EMAIL: \_\_\_\_\_

Hotmail accounts have restrictions and may not receive all documents

CLUB FEES:  0 – 24 Members: \$75.00      **All athletes must purchase individual Athletics Manitoba memberships**  
 25 + Members: \$150.00  
 Rural Club: \$25.00 (60kms + outside Winnipeg Perimeter)

BINGO FUNDRAISING PROGRAM PARTICIPANT       No     Yes

**MEMBERSHIP FORMS ARE REQUIRED FOR ALL MEMBERS LISTED BELOW**

**CLUB EXECUTIVE: (mandatory) – Three Club Executives will receive free Associate Memberships**

PRESIDENT: \_\_\_\_\_ SECRETARY: \_\_\_\_\_ TREASURER: \_\_\_\_\_  
 REGISTRAR: \_\_\_\_\_ BINGO CONTACT: \_\_\_\_\_ VOLUNTEER COORD: \_\_\_\_\_

\*Please provide a full list of club associates on an attached piece of paper, if there are more than listed above.

**CLUB COACHES: Three Club Coaches will receive free Coach Memberships. Please submit all membership forms. ALL COACHES MUST COMPLETE THE RESPECT IN SPORT PROGRAM IN ORDER TO REGISTER**

	COACH NAME	RESPECT IN SPORT NO.	EVENT GROUP(S)	EVENT GROUP(S)	EVENT GROUP(S)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Once paid in full, the Club Membership fee provides club status for one year, from January 1<sup>st</sup> 2009 through December 31<sup>st</sup> 2009. The club status is recognized by both Athletics Manitoba and Athletics Canada. Athletics Manitoba agrees to provide club and coach communications, grant the club voting privileges at the Athletics Manitoba Annual General Meeting, give the club the right to enter the club's athletes in Athletics Manitoba competitions, and provide fundraising opportunities under the club name. **On behalf of the above named club, I agree to supply volunteers / officials for Athletics Manitoba competitions and activities.**

SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_ 20 \_\_\_\_\_

Please complete and submit with payment to **ATHLETICS MANITOBA**