| LUCA CLUB Membership Application | | | | |
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| Contact Information | | | | |
| Club Name: | | | | |
| Club Address (SU/Sports department): | | | | |
| Club Postcode: | | | | |
| Training venue(s): | | | | |
| President/Chair name: | | Email: | | Phone: |
| Student Union Sports Head Name: | | Email: | | Phone: |
| University Sports Head Rep Name: | | Email: | | Phone: |
| Club Information | | | | |
| Club Facebook page and/or group: | | | Club Twitter: | |
| Club Website(s): | | | | |
| Club Colours: | | | | |
| Are you an England Affiliated Club? | | | | |
| Number of male members: |  | | |  |
| Number of female members: |  | | |  |
| Number of trained coaches: | Description of coaches qualification(s) | | |  |
| How many of these are students? |  | | |  |
| Number of trained officials: | Description of trained official(s) | | |  |
| How many of these are students? |  | | |  |
| Declaration: | | | | |
| On behalf of \_\_\_\_\_\_\_\_\_\_\_ I apply to become a member of London Universities and Colleges Athletics. I certify that the named club:   1. Agrees to abide by the rules and policies of LUCA set out in the LUCA constitution. 2. Is committed to providing a welcoming, well structured and safe club environment 3. Is committee to engage and support LUCA where appropriate such as attending the LUCA council 4. Is committed to participating in and providing appropriate types of competition where appropriate 5. Is committed to a positive approach to coaches and coach development – wherever possible will use licensed coaches to deliver their activities | | | | |
| Signature of applicant: | | | | Date: |
| Please include a copy of your club constitution and equal opportunities statement (where possible) and return all forms to james@london-athletics.com | | | | |

