



**Club Sports Council/Administration:**

What issues need to be addressed by the Club Sports Council and/or Administration to better serve the Club Sports members/teams?

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**Additional Comments:**

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**Signature of Person Submitting Form:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Club Advisor:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Assistant Director:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Club Contact Info

(Update if changes have been made ONLY)

Club \_\_\_\_\_

**President:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Vice President:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Secretary:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Treasurer:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Safety Officer:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Coach:** \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Local Address: \_\_\_\_\_

**Advisor:** \_\_\_\_\_ Email: \_\_\_\_\_

XU Phone #: \_\_\_\_\_ XU Mail Location: \_\_\_\_\_