

## **CONFERENCE MEMBERSHIP**

## Application for Division I Championship or National Collegiate Championship Single-Sport Conference

Conference membership is available to duly elected athletics conferences of colleges and universities that conduct conference competition and determines a champion in one or more sports in which the NCAA conducts championships. All the members of the conference shall be active members of the NCAA.

An athletics conference desiring to become a Division I single-sport conference in a sport, other than basketball and football, that has a Division I championship shall be composed of at least six active NCAA members, at least 75% of which must be active Division I programs.

This form (and the application fee) must be received by the national office by **June 1** for a membership effective August 1 of the following academic year. A check in the appropriate amount for annual dues shall accompany the application. Please find information on the submission of the application fee on a separate form enclosed with this application. Should the applicant fail election, the dues paid shall be refunded.

1.	Name of conference:	
	Phone	Email:
	Mailing address:	
	City and state:	Zip code:
	Website:	
2.	Commissioner/Executive officer:	
	Title:	
	Pnone:	Email:
	Mailing address:	
	City and state:	Zip code:
3.	Conference president:	
	Title:	
	Phone:	Email:
	Mailing address:	
	City and state:	Zip code:
4.	Conference senior woman administrator:	
	Title:	
	Pnone:	Email:
	Mailing address:	
	City and state:	Zip code:

Application for Division I Championship or National Collegiate Single-Sport Championship Conference Page No. 2

5. Senior compliance administrator: Title: Email:\_\_\_\_ Phone: Mailing address: \_\_\_\_\_\_City and state: Zip code: City and state: \_\_\_\_\_ 6. Intercollegiate sport in which this single-sport application is being made: Sport:\_\_\_\_\_ Gender:\_\_\_\_ • Does this sport have a Division I Championship or a National Collegiate Championship? (circle one) 7. Member institutions. Member Institutions and institutional signatures (each member institution must submit signatures from the director of athletics and the individual whom athletics reports to. These signature may be submitted under separate cover, but it must be clear which institution is represented): a. Institution: Signed: (Director of Athletics) \_\_\_\_\_ Date:\_\_\_\_\_ Printed Name: Signed: (Individual to whom athletics reports to)\_\_\_\_\_ Printed Name Date: b. Institution: Signed: (Director of Athletics)\_\_\_\_\_ Printed Name: Date: Signed: (Individual to whom athletics reports to) Printed Name Date: c. Institution: Signed: (Director of Athletics)\_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_ Signed: (Individual to whom athletics reports to)\_\_\_\_\_\_ Printed Name\_\_\_\_\_ Date:\_\_\_\_\_

## Application for Division I Championship or National Collegiate Single-Sport Championship Conference Page No. 3

C

d.	Institution:		
	Signed: (Director of Athletics)		
	Printed Name:		
	Signed: (Individual to whom athletics reports to)	<del></del>	
	Printed Name		
e.			
	Signed: (Director of Athletics)		
	Printed Name:		
	Signed: (Individual to whom athletics reports to)		
	Printed Name	Date:	
f.	Institution:		
1.			
	Signed: (Director of Athletics) Printed Name:	Date	
	Signed: (Individual to whom athletics reports to)	Datas	
	Printed Name	Date	
g.	Institution:		
۶۰	Signed: (Director of Athletics)		
	Printed Name:	Date:	
	Signed: (Individual to whom athletics reports to)		
	Printed Name		
	Timed Name	Date	
h.	Institution:		
	Signed: (Director of Athletics)		
	Printed Name:		
	Signed: (Individual to whom athletics reports to)		
	Printed Name	Date:	
i.	Institution:		
	Signed: (Director of Athletics)		
	Printed Name:	Date:	
	Signed: (Individual to whom athletics reports to)		
	Printed Name	Date:	

Application for Division I Championship or National Collegiate Single-Sport Championship Conference Page No. 4

C

Institution:		
Signed: (Director of Athletics)		
Printed Name:		
Signed: (Individual to whom athletics reports to)		
Printed Name		
k. Institution:		
Signed: (Director of Athletics)		
Printed Name:		
Signed: (Individual to whom athletics reports to)		
Printed Name	Date:	
1. Institution:		
Signed: (Director of Athletics)		
Printed Name:	Date:	
Signed: (Individual to whom athletics reports to)		
Printed Name	Date:	
Signature:		

This application must be received by the national office not later than June 1. Completion of this application in no way implies or ensures approval of membership. If a conference fails to fully complete the application or the NCAA does not receive the application on time, the conference shall not be considered for membership for the upcoming academic year.

## PLEASE SEND COMPLETED APPLICATION TO:

**Troy Arthur** 

NCAA P.O. Box 6222 Indianapolis, Indiana 46206 (PH) 317 917 6473

**OR** 

Jenn Samble

NCAA P.O. Box 6222 Indianapolis, Indiana 46206 (PH) 317-917-6675

ACCOMPANIED BY A COPY OF YOUR ORGANIZATION'S CONSTITUTION AND BYLAWS AND CHECK IN THE AMOUNT OF \$900 FOR PAYMENT OF THE ANNUAL DUES