

AAU NON ATHLETE INDIVIDUAL MEMBERSHIP APPLICATION



AAU Membership Year is September 1 to August 31. A membership card will be forwarded to you.

First Name		Middle Name		Last Name	
Street Address			City		State Zip
City of Birth		County of Birth		State of Birth	
Application Date		Work Phone / Ext		Home Phone	
E-Mail Address				Fax Number	
Birth Date / /		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Cell Number	
Do you have Health & Accident Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Club Code (if known)	Club Name (if known)		Sport Code (see list below)	
Check Primary Program		<input type="checkbox"/> Youth Program If you work with ages 1 to 20		<input type="checkbox"/> Adult Program If you work with ages 21 to 99	
PROVIDE EITHER ADDRESS HISTORY FOR PAST 7 YEARS <u>OR</u> YOUR SOCIAL SECURITY NUMBER. SS # _____					
STREET ADDRESS		CITY		STATE ZIP	
By paying or authorizing payment of my annual membership dues, I certify that: 1) I have never been convicted of any sex offense nor felony; or, if so, I must apply for membership (and receive approval) through the AAU National Office; and, 2) this application is correct in every material aspect, including but not limited to my (street) address and birth date. The Applicant agrees to be bound by the AAU Code, including all AAU Policies, which are available for review on the AAU Web site at www.aausports.org . NOTE: Parent/Guardian signature if member is under 18 years old.					
Member's Signature			Parent/Guardian Signature		
Date			Date		

YOUTH PROGRAM (If you work with ages 1 to 20)	Regular Membership	Added Benefit Membership *
	<input type="checkbox"/> \$14.00	or <input type="checkbox"/> \$16.00
NON-ATHLETE – ALL SPORTS- Example: <i>Administrator, Bench Personnel, Coach, Instructor, Manager, Official, Team Leader, Tournament Director, Volunteer, Other.</i>		

*Added Benefit Membership includes additional insurance coverage in certain programs, as defined by AAU.

ADULT PROGRAM (If you work with ages 21 to 99)	Regular Membership	Added Benefit Membership *
	<input type="checkbox"/> \$14.00	or <input type="checkbox"/> \$16.00
NON-ATHLETE – ALL SPORTS – Example: <i>Administrator, Bench Personnel, Coach, Instructor, Manager, Official, Team Leader, Tournament Director, Volunteer, Other.</i>		

PLEASE SELECT YOUR PRIMARY SPORT				YOUTH AND ADULT SPORT CODES			
CODE	SPORT	CODE	SPORT	CODE	SPORT	CODE	SPORT
AE	Aerobics	DA	Dance	JU	Judo	SB	Softball
AT	Athletics	DI	Diving (Youth Only)	JT	Jujitsu	SU	Surfing
BL	Baseball	FB	Baseball/Women	JR	Jump Rope	SW	Swimming
BA	Basketball/Boys	GB	Baseball/Girls	KA	Karate	TB	Table Tennis
BW	Basketball/Girls	FH	Field Hockey	LC	Lacrosse	TW	Taekwondo
MB	Basketball/Men	FI	Fishing	PC	Physically Challenged	TT	Trampoline & Tumbling
WB	Basketball/Women	FF	Flag Football	PF	Physical Fitness	TE	Tennis
BT	Baton Twirling	GO	Golf	PL	Powerlifting	VB	Volleyball
CH	Cheerleading	GY	Gymnastics	RU	Rugby	WL	Weightlifting
CM	Chinese Martial Arts	HO	Inline Hockey	SC	Soccer	WR	Wrestling

Make check payable to AAU. Mail application and fees to: AAU Headquarters, P.O. Box 22409, Lake Buena Vista, FL 32830.

