



ADOPT-A-CLUB APPLICATION FORM

Date _____

Applying as: (please check one)

____ Club

____ Individual Team

Club name _____

Name and role within club _____

Team name and age group (if you are applying as individual team) _____

Address _____

City/State/Zip _____ County _____

Phone _____ Cell _____ Fax _____

Email _____ Website _____

Year club was founded _____ Tax ID # _____

Mission of club _____

Name of board President _____

of board members _____ # of volunteers _____ # of paid employees _____

Number of coaches _____ Number of youth players _____

How has your club grown in the past two (2) years? _____

How many scholarship players do you have? _____

Why should your club be selected to participate in this program? _____

Brief description of how you will use the Adopt-a-Club program to advance youth in your club. _____

I certify that the above information is correct and that I am authorized by the governing board of this organization to submit this application to the Portland Timbers.

Signature _____ Date _____

Print name _____

Please check one:

President

Board Member

Parent/Volunteer _____

(Please specify)