

# Club Membership Registration Form

November 1, 2018 – October 31, 2019

Legal Club Name:

Physical Club Address:		City:	Postal Code:
Mailing Address: <input type="checkbox"/> Same as Above		City:	Postal Code:
Club Telephone #:	Club Fax #:	Club Email:	
Website:	Facebook Name:	Twitter Name:	Instagram Name:
Incorporation: <input type="checkbox"/> Private Business <input type="checkbox"/> Private business with independent, non-profit advisory board <input type="checkbox"/> Registry of Companies number: _____		Club set-up (select one): <input type="checkbox"/> Set-up and tear-down <input type="checkbox"/> Full-time set-up <input type="checkbox"/> Set-up for part of the year	

## Club Contact Information (contact(s) below will receive all GNL communications)

Club contact person #1:	Daytime Telephone #:	Email:
Club contact person #2:	Daytime Telephone #:	Email:
Club contact person #3:	Daytime Telephone #:	Email:

## Competitive Programs Offered:

<input type="checkbox"/> Women's Artistic	<input type="checkbox"/> Men's Artistic	<input type="checkbox"/> Trampoline	<input type="checkbox"/> Other (Please Specify):
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## Gymnastics For All Programs Offered:

<input type="checkbox"/> Adult Gymnastics	<input type="checkbox"/> Birthday Parties	<input type="checkbox"/> Camps	<input type="checkbox"/> Cheerleading
<input type="checkbox"/> Gym Rentals / User Groups	<input type="checkbox"/> Gymnaestrada/Performance	<input type="checkbox"/> Parkour	<input type="checkbox"/> School Groups
<input type="checkbox"/> Parent & Tot	<input type="checkbox"/> Preschool Gymnastics	<input type="checkbox"/> Special Needs	<input type="checkbox"/> Men's Artistic
<input type="checkbox"/> Women's Artistic	<input type="checkbox"/> Trampoline Gymnastics	<input type="checkbox"/> Dance	<input type="checkbox"/> Fitness

## Note:

- The club contact person above is expected to distribute GNL communications to appropriate club personnel
- Please complete all forms. Forms must be completed in full. Incomplete forms will be returned and may delay approval / be subject to late fees.

## Payment and Agreement

This application is made with the understanding that if accepted, the club/organization will be governed by the by-laws and policies of GNL.

## For GNL Use Only

Date Received:	Application Complete:					Payment Received:	
	<input type="checkbox"/> Application (All pages)	<input type="checkbox"/> Letter of Introduction	<input type="checkbox"/> Promo	<input type="checkbox"/> Business confirmation	<input type="checkbox"/> Location Confirmation	<input type="checkbox"/> CRC's on file	<input type="checkbox"/> Yes

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**Club Name:**

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## Key Personnel

President/Owner:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
Club Administrator:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
Registrar:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
MAG Competitive Coordinator/Head Coach:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
WAG Competitive Coordinator/Head Coach:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
TG Competitive Coordinator/Head Coach:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
Gymnastics For All Coordinator/Head Coach:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
Communications/Media Liaison:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA
Finance Coordinator/Bookkeeper:	CRC: <input type="checkbox"/> Yes	Daytime Telephone #:	Email:  Receive GNL electronic communication about: <input type="checkbox"/> General <input type="checkbox"/> NCCP <input type="checkbox"/> WAG <input type="checkbox"/> MAG <input type="checkbox"/> TRA <input type="checkbox"/> GFA

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### Note:

- Clubs provide consent for GNL to send communications as indicated above
  - All clubs must provide the name of their privacy officer in order to register and maintain good member standing. More details are available in the GNL Policy and Procedures Manual.
  - Please complete all forms. Forms must be completed in full. Incomplete forms will be returned and may delay approval
  - Current criminal record check (CRC) must be on file with GNL for key personnel
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# Club Membership Registration Form

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## Compliance Statement

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### Club Name:

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Gymnastics NL collects information from its members in accordance with the Personal Information Protection Act. GNL may from time to time provide information to partner organizations. Partner organizations are those organizations with whom GNL has engaged to assist in the operations and furtherance of gymnastics in NL. The information provided to partner organizations may include club contact information and statistical information. GNL will not disclose personal information unless consent has been obtained or the Personal Information Protection Act permits the disclosure.

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### Club Requirements:

As a member club of Gymnastics NL for the 2018-2019 membership season (November 1, 2018 – October 31, 2019), we have read the Gymnastics NL policies and procedures available on the GNL website and agree to adhere to all published policies, including but not limited to the following:

- Provide a safe training environment for all participants and members
- Adhere to the GNL codes of conduct
- Ensure all registered coaches have met the minimum coaching requirements (including first aid), completed the respect in sport online training program, online concussions program (Making Head Way) and have completed and submitted a current criminal record check. (Current criminal record check (CRC) must be on file with GNL for key personnel).
- Ensure that all individual members are registered in the appropriate membership category and that any changes or upgrades are made by the designated timelines. Use and retain appropriate waivers & releases for all individually registered members.
- Track, record and submit membership data and payments as outlined in the membership policy for all individual club members by the requested deadlines.
- Track, record, retain and submit required participant list data and payments (where applicable) by month end for one-time visitors (ie: birthday party & guest participants) and associate member programs (ie: school field trips)
- Understand that from time to time GNL staff will field audit and verify membership registration, request supporting documentation for one-time visitor or associate member program participation and review all competition participation to ensure registration compliance.
- Adhere to all established deadlines for all program activities administered by GNL
- Inform GNL of any out of facility activities to ensure appropriate insurance coverage is available (ie: demonstrations, mall displays, parades)
- Notify and file incident reports and accident claim forms with GNL for all injuries which occur with your GNL sanctioned programs and activities.
- Participate only in GNL / GCG sanctioned activities and submit the appropriate documents for sanctioning requests with GNL for all out of province activities

Failure to comply with GNL policies and procedures may result in placement into bad standing. Insurance coverage applies for clubs in good standing, when all requirements of registration are fulfilled. Failure to register individual members or provide required summary of participant lists will be considered an act of misrepresentation and may adversely affect the club's membership. There will be no insurance coverage for unregistered members or unlisted participants.

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### Note:

- Please complete all forms. Forms must be completed in full. Incomplete forms will be returned and may delay approval.
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Club representative name (Please Print):

Signature:

Date:

## Club Details

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# Club Membership Registration Form

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Club Name:

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## Club Information

What is the planned scope of club programming (ie: introductory gymnastics, recreational only, recreational and competitive, etc)?

Please indicate or attach, the club's mission, goals and objectives

What type of facility will your club operate out of (ie: permanent facility, school, recreation centre, etc)?

Have you ever owned or operated a gymnastics club in Canada or the United States? If yes, please provide details including the name(s), location(s) and years of operation

No  Yes (please provide details below)

## Program Information – Please Attach a Program Outline (Class Listing, Brochure, Website Address)

What are your planned coach to participant ratios?

How many sessions per year do you plan to offer?

When will your sessions be offered?

Will there be activities occurring in your facility that are not specifically related to gymnastics programming? (ie: other programs, night courses, etc)

No  Yes (please explain below)

Do you plan to routinely perform small displays at non-competitive gymnastics events (demonstrations, mall display, parades, etc)?

No  Yes (please explain below)

## Coaches / Instructors

How many certified coaches will be working at your facility?

Please indicate the number of coaches who do not meet the minimum requirements

## Note:

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# Club Membership Registration Form

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## Coach Certification

Club Name:

### Coaches

Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:
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Coach Name:	NCCP#:	Level:
Coach Name:	NCCP#:	Level:

Please attach an additional sheet for additional coaches

### Note:

- Please complete all forms. Forms must be completed in full. Incomplete forms will be returned and may delay approval.

### For GNL Use Only

Date Received:

NCCP certification verified:

# Club Membership Registration Form

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## Application Form

Any new club wanting to be recognized as a full member club of GNL, must submit a full member club application package with the \$500.00 membership fee, for consideration by the GNL Board of Directors.

### How to Register a NEW Full Member Club

For a new club to become a GNL full member club, the following must be submitted for consideration by the Executive Director:

1. Letter of introduction (describing the club, facility, staff, coaching ratio)
2. Completed GNL new full member club application form including promotional material or website detailing program information
3. Copy of certificate of incorporation, certificate of good standing or business license
4. Letter from landlord, city, municipality, or lease confirming training location
5. Copy of criminal record checks for principals or officers (eg: owner, manager, head coach), if not already on file with GNL
6. Membership fee

### Full Member Club RENEWAL

- In order to continue to receive benefits of Gymnastics NL membership, full member clubs who wish to re-register must submit their application and payment by October 31. Failure to do so will result in the withdrawal of insurance coverage for the club and other membership benefits.
- Registration forms and payment for renewing full member clubs received after October 31 will be assessed a \$100.00 late fee.
- A full member club that does not register for one year or more will be subject to probation as outlined in the new club section, upon re-application

### How to RENEW your Full Member Club Registration

Submit the following to GNL by October 31:

1. Completed GNL member club renewal forms.
2. \$500.00 membership fee

Clubs that have not renewed their membership by October 31 will not be registered as members and will not receive the associated benefits (including insurance coverage).

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### Club Communications

- GNL requires a minimum of one club contact to be designated to receive all club communications. This person is expected to distribute Gymnastics NL communications to appropriate club personnel.
- Clubs may also add additional club personnel to receive communications as outlined on page 2