



NATIONAL ASSOCIATION OF ATHLETICS ADMINISTRATIONS  
OF TRINIDAD AND TOBAGO

APPLICATION FOR ATHLETIC MEMBERSHIP

**TO:** The Secretary – National Association of Athletics and Administrations

**ATHLETE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHONE:** \_\_\_\_\_  
(Home) (Office) (Cell)

**DATE OF BIRTH:** \_\_\_\_\_

I hereby apply for **ATHLETIC MEMBERSHIP** with the National Association of Athletics Administration of Trinidad and Tobago subject to the constitution of the Association and the said rules and regulations.

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

**FOR ATHLETES UNDER AGE 16**

I hereby give consent to my son/daughter to apply for athletic membership with the National Association of Athletics Administration of Trinidad and Tobago.

Parents Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CLUB ENDORSEMENT**

I hereby certify that \_\_\_\_\_ is a member of \_\_\_\_\_

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

(Signature of Secretary/President) \_\_\_\_\_

**FOR OFFICIALS USE ONLY**

Application received on \_\_\_\_\_

Signature \_\_\_\_\_

Secretary \_\_\_\_\_ Date Approved \_\_\_\_\_

**APPLICATION MUST BE ACCOMPANIED BY ATHLETES' INFORMATION FORM. A COPY OF BIRTH CERTIFICATE AND (2) PASSPORT PHOTOS**