



ASSOCIATE MEMBERSHIP TO CIF APPLICATION
(PLEASE PRINT)

1. SCHOOL NAME: _____
2. MAILING ADDRESS: _____
3. SCHOOL PRINCIPAL: _____
4. SCHOOL A/D: _____
5. AD E-MAIL ADDRESS: _____
6. SPORTS BEING PLAYED: BOYS- _____

GIRLS- _____

7. AUTHORIZATION TO JOIN: _____
(PRINCIPAL'S SIGNATURE)
8. FINANCIAL OBLIGATION: \$150 PER YEAR

MIDDLE SCHOOLS AND JUNIOR HIGH SCHOOLS THAT JOIN WILL RECEIVE

- 1) BY-LAWS, DIRECTORY, ETC.
- 2) ALL NATIONAL FEDERATION SPORTS RULE BOOKS
- 3) ALL CIF COMMUNICATIONS