



FunTeam Alberta Group Application:

Contact Info:

Lead Volunteer Name:

Phone Number:

Email Address:

Group Information:

Location/Community/Area:

Sport:

Age Range:

Please provide a detailed description of the proposed program:





Group History:

How long has this group been operational?

Were you previously registered with another organization?

How did you hear about FunTeam Alberta?

Why do you want to be a member of FunTeam Alberta?

