

**APPLICATION FOR MEMBERSHIP**

1. **BASIC INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of School: {school}** | | | |
| **Name of School Head & Title:** | | | |
| **Address: {address}** | | | |
| Tel. Nos. | | E-Mail: { email } | |
| Fax Nos. | | Website: | |
| School Classification:  [ ] Sectarian  [ ] Non-Sectarian  [ ] Others (*pls. specify*) | Sports Affiliation:  [ ] UAAP  [ ] NCAA  [ ] Others (*pls. specify*)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Number of Students:  [ ] Secondary \_\_\_\_\_\_\_\_\_\_  [ ] Tertiary \_\_\_\_\_\_\_\_\_\_  **Total \_\_\_\_\_\_\_\_\_\_** |

1. **COURSES OFFERED**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course** | | **No. of Students** | **Course** | | **No. of Students** |
|  | **Secondary/High School** |  | 8 |  |  |
| 1 | Junior High School |  | 9 |  |  |
| 2 | Senior High School |  | 10 |  |  |
|  | **TOTAL** |  | 11 |  |  |
|  | **Tertiary/College** |  | 12 |  |  |
|  | COURSE/S |  | 13 |  |  |
| 1 |  |  | 14 |  |  |
| 2 |  |  | 15 |  |  |
| 3 |  |  | 16 |  |  |
| 4 |  |  | 17 |  |  |
| 5 |  |  | 18 |  |  |
| 6 |  |  | 19 |  |  |
| 7 |  |  | 20 |  |  |
|  |  |  |  | **TOTAL** |  |

1. **VARSITY TEAMS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Secondary Sports** | | **Boys** | **Girls** | **Tertiary Sports** | | **Men** | **Women** |
| 1 |  |  |  | 1 |  |  |  |
| 2 |  |  |  | 2 |  |  |  |
| 3 |  |  |  | 3 |  |  |  |
| 4 |  |  |  | 4 |  |  |  |
| 5 |  |  |  | 5 |  |  |  |
| 6 |  |  |  | 6 |  |  |  |
| 7 |  |  |  | 7 |  |  |  |
| 8 |  |  |  | 8 |  |  |  |
| 9 |  |  |  | 9 |  |  |  |
| 10 |  |  |  | 10 |  |  |  |
| 11 |  |  |  | 11 |  |  |  |

1. **OTHER INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| School Logo:  *(to be enclosed*) |  |  | School Color: |
| School Mascot: |  |  | Athletes Uniform Color: |

1. **PAYMENT DETAILS (*Membership Application Fee*)**

#### 

[ ] Amount – **Php5,000.00**

[ ] Check Number & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Name of Bank & Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Note: Please make Check Payable to PRISAA National, PNB Angeles

#### City Branch, Sto. Rosario St., Angeles City

#### Account # 2026-7000-4544

1. **CERTIFICATION**

|  |  |
| --- | --- |
| Prepared By:    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_  Signature Over Printed Name Date  Position : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Certified Correct:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_  Signature Over Printed Name Date  Position : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. **ACTION TAKEN**

|  |  |
| --- | --- |
| *Recommending Approval:*  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_**  PRISAA Provincial/City Date  Chapter President | *Approved:*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_  PRISAA Regional Date  Association President |
| *CONFIRMED:*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_  PRISAA National Chairman Date | |

Note: To be accomplished in Triplicate

Distribution of Copies: PRISAA Member-School, Regional Association & National Association