Student Club Registration Form

Please complete all the information below. Please attach the constitution along with this form and submit the registration fee (\$20).					
Registration Year:					
Name of Club:					
Related Major(s) or Special Interest (ex: community, service, ethnic/cultural, religious, etc.):					
Purpose and Description of Club:					
Club members and titles: President					
Name: Email:	Phone:				
Vice President Name: Email:	Phone:				
Treasurer Name: Email:	Phone:				
Secretary Name: Email:	Phone:				
Faculty Advisor Name: Email:	Phone:				

Attach a list of any additional officers.

Requirements

Student clubs recognized by Stanton University exist to facilitate student development that compliments classroom learning and life experiences. All student clubs are open to all members of the SU Community.

- Send one member to attend a mandatory orientation for all new and existing clubs
- Renew registration annually

- Supplies and operating expenses should come from organization's budget
- Fund-raisers involving food may not be commercial and must obtain a temporary food permit

SU Student Club Advisors are expected to:

- Have a copy of the club constitution
- Accompany student clubs on any off-campus trips
 - MUST help find another SU employee to attend if unavailable
- Meet with club officers regularly
- Serve as the first resource for any dispute within the student club
- Help ensure that the club activities meet the mission/purpose of the club and support the mission and goals of the college
- Serve as a mentor to the club members
- Stay aware of projects or events and facilitate ideas without dominating

By signing below, I state that I have read and agree to all the policies and requirements for club registration:

Club President	Date
Club Vice President	Date
Club Treasurer/Secretary	Date
Faculty Advisor	Date
For office use only:	
By signing below, I acknowledge that I have received this application:	
Signature of Office Staff	Date
By signing below, I acknowledge that I have reviewed this application:	
Signature of Director of Student Affairs	Date
By signing below, I acknowledge that I have approved/disapproved (circlub after careful review:	cle one) the registration of this

Signature	of SU	Administration	Representative
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