

Student Organization Information and Signature Sheet

Account # _____

ORGANIZATION NAME:

PRESIDENT INFORMATION:

President Name (print): _____

Signature: _____

Campus E-Mail Address: _____

Cell Phone Number: _____

TREASURER INFORMATION:

Treasurer Name (print): _____

Signature: _____

Campus E-Mail Address: _____

Cell Phone Number: _____

ADVISOR INFORMATION:

Advisor Name (print): _____

Signature: _____

Campus E-Mail Address: _____

Cell Phone Number: _____
