



Club Proposal

Incomplete forms will NOT be processed

Proposed Club Name	Academic Year	Today's Date
Contact Person (PRINT)	Signature	Phone # to be reached at

Description of Club: _____

Goals: _____

Event Ideas: _____

Will members be charged an yearly fee? YES NO If so, how much?

What will this fee be used for?

FOR SCSU USE ONLY
SCSU Date Stamp
and Staff Initials

FOR SCSU USE ONLY
Approved by: _____ Date Approved: _____
SCSU President
Notes:

