



2009-2010 Club/Student Organization Application and Registration Form

Date _____

Club / Organization Name _____

Club/Org Email _____ Club Org Webpage _____
(Students must consult with IT for approval)

Club/Org Mission Statement _____

Type of Club or Organization

- | | | |
|--|--|--|
| <input type="checkbox"/> Academic/Honorary | <input type="checkbox"/> Academic/Departmental | <input type="checkbox"/> Entertainment/Music/Theater |
| <input type="checkbox"/> Volunteer Service | <input type="checkbox"/> Club Sport/Recreation * | <input type="checkbox"/> Multicultural/Diversity |
| <input type="checkbox"/> Special Interest | <input type="checkbox"/> Religion/Faith Based | <input type="checkbox"/> Professional |

**Each participating member must complete 'Release of Liability and Assumption of Risks' form each academic year prior to participating in off campus events and submit it to the Registrar/Student Services Office.*

Club/Org Leadership

Please indicate club's primary contact person with a checkmark✓.

If you have not selected leadership for 2009-10, please identify a transitional contact person and note that s/he is transitional.

| Office | Name | Student Number | Student Email | Phone |
|--------|-------|----------------|---------------|-------|
| 1) | _____ | _____ | _____ | _____ |
| 2) | _____ | _____ | _____ | _____ |
| 3) | _____ | _____ | _____ | _____ |
| 4) | _____ | _____ | _____ | _____ |
| 5) | _____ | _____ | _____ | _____ |

Students holding office in a club/org are considered Student Leaders at USN and must be in and maintain good academic standing in order to hold a position or office.

2009-2010 Club/Student Organization Application and Registration Form (continued)

Annual Events and Regular Meetings Times

Provide proposed dates for annual events and information about regular meeting times.

Advisor(s)

A faculty advisor is required and can be a faculty, administrator or staff member. Advisors agree, at a minimum, to guide, monitor travel, supervise activities, attend meetings as possible and support club leadership.

| Name | Campus Address | Phone | Email | Signature |
|------|----------------|-------|-------|-----------|
|------|----------------|-------|-------|-----------|

This form must be completed each year so current information is always on file in the Registrar/Student Services Office.

Disclaimer: Although this organization is or may be approved to operate on any University of Southern Nevada (USN) campus, the views, opinions, statements and/or philosophy of the organization are solely those of the organization and do not necessarily represent those of the students, employees, Administration and the Board of Trustees of USN.

If you have any questions please contact:

Registrar/Student Services Office
Henderson-702-968-2029
South Jordan-801-878-1040
registrar@usn.edu

For Registrar/Student Services Office Use:

Date Reviewed: _____ By: _____

Date Discussed with Respective Academic Unit Head: _____

Date Reviewed by Administrative Council: _____

Date Reviewed by Board of Trustees: _____

Notified Primary Contact: _____