

F / S _____

Name of Organization

UNIVERSITY RECOGNIZED STUDENT ORGANIZATION REGISTRATION FORM

Student Activities Office • BMU 213 • California State University, Chico • 530.898.5396 • www.csuchico.edu/sac
For University Recognized Student Organizations only • Not for IRA or AS Programs (see your advisor)

PLEASE PRINT LEGIBLY! The following individuals are authorized representatives of this organization. Their names and addresses will be available to the public. Only these representatives may conduct organization business on campus.

MAIN CONTACT PERSONS (FORM WILL NOT BE ACCEPTED IF THIS SECTION IS INCOMPLETE):

	<u>NAME</u>	<u>STUDENT ID (REQUIRED)</u>	<u>EMAIL ADDRESS</u>
PRESIDENT:	_____	_____	_____
	<u>PHONE #</u>	<u>POSTAL ADDRESS</u>	
	_____	_____	
	<u>NAME</u>	<u>STUDENT ID (REQUIRED)</u>	<u>EMAIL ADDRESS</u>
TREASURER:	_____	_____	_____
	<u>PHONE #</u>	<u>POSTAL ADDRESS</u>	
	_____	_____	

OTHER OFFICERS AUTHORIZED TO REPRESENT THE ORGANIZATION:

<u>TITLE</u>	<u>NAME</u>	<u>EMAIL ADDRESS</u>	<u>PHONE #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ORGANIZATION WEB ADDRESS (IF AVAILABLE): _____ **NUMBER OF CURRENT MEMBERS:** _____

FACULTY/STAFF ADVISOR (MUST HAVE AT LEAST ONE UNIVERSITY STAFF/FACULTY MEMBER SERVING AS ADVISOR. EMPLOYEES OF THE ASSOCIATED STUDENTS OR EITHER UNIVERSITY FOUNDATION ARE NOT ELIGIBLE.)

<u>NAME</u>	<u>CAMPUS ZIP</u>	<u>BLDG/ROOM</u>	<u>PHONE #</u>
_____	_____	_____	_____
_____	_____	_____	_____

COMPLIANCE WITH UNIVERSITY REQUIREMENTS

1. This organization is aware of and adheres to the Student Organization Policy, including Chancellor's Executive Order #969 and appropriate sections of Title 5 of the California Code of Regulations. These policies and statutes are available at <http://www.csuchico.edu/sac/orgpolicies.html>.
2. I attest that this organization has no rules or policies that discriminate on the basis of race, religion, national origin, ethnicity, color, age, gender, marital status, citizenship, sexual orientation, or disability. The prohibition on membership policies that discriminate on the basis of gender does not apply to social fraternities or sororities or to other university living groups.
3. Members of this organization agree to function within the purposes, structures, and policies stated in the constitution or bylaws on file with the Student Activities Office. All constitutional amendments, revisions, and changes must be submitted to the Student Activities Office within 90 days.

I have read the above and certify that the organization is in compliance with all University requirements.

Signed _____ Date _____

REGISTRATION FORMS MUST BE COMPLETED EACH SEMESTER TO REMAIN A RECOGNIZED ORGANIZATION!