



Establishing a Club

Request for Approval of ASB Club or Activity

Name of Club or Activity requested _____

Describe proposed activities and goals of club _____ Á

_____ Á

_____ Á

Describe how money will be raised to fund activities _____ Á

_____ Á

_____ Á

_____ Á

Funds raised will be used to _____ Á

_____ Á

_____ Á

_____ Á

Name of proposed advisor in charge of activities _____

Budget capacity requested _____

Submitted by _____

Signature

Date

Principal _____ Primary Advisor _____

Signature

Signature

Approved _____

Not Approved _____

Signature

Date

Accepted by Board of Directors _____ Date _____