Establishing a Club

Request for Approval of ASB Club or Activity

Name of Club or Activity requested_____

Describe proposed activities and goals of club_____

_____

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_____

Describe how money will be raised to fund activities_____

_____

_____

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_____

Funds raised will be used to_____

_____

_____

_____

_____

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_____