

Establishing a Club

Request for Approval of ASB Club or Activity

Name of Club or Activity requested _____

Describe proposed activities and goals of club _____

Describe how money will be raised to fund activities _____

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 _____