

OFFICER REGISTRATION FORM
PROSPECTIVE CLUBS

Club Name: _____ # of People Interested : _____

Month of Elections: _____ Membership Dues (amount): _____

Rcvd: _____ *By:* _____ *Code* _____

CONTACT PERSON (Available during Breaks)	Name: _____	Mailing Address: _____
	Phone: _____ E-Mail: _____	

ADVISOR	First Name: _____ Last Name: _____
	Title (circle one): Fr. Bro. Sr. Dr. Prof. Mr. Ms. Other: _____ Net ID: _____

I agree to serve as advisor for this prospective student club for 2016-2017. Signature: _____ Date: _____

Officer 1 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

OFFICER 1 WILL SERVE AS THE CENTRAL SPOKESPERSON FOR THE ORGANIZATION. HE/SHE MUST BE A NOTRE DAME STUDENT.

Officer 2 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 3 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 4 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 5 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 6 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 7 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A

Officer 8 Title/Position:	First Name: _____ Middle Name: _____ Last Name: _____
	Net ID (email): _____ School: <input type="checkbox"/> ND <input type="checkbox"/> SMC <input type="checkbox"/> HCC

Year in school _____ Month your term expires: _____ Will you be studying abroad next year? Spring Fall N/A