Student Club/Organization Registration Form

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COAHOMA COMMUNITY COLLEGE CLARKSDALE, MISSISSIPPI

STUDENT CLUB/ORGANIZATION REGISTRATION

1.	Organization Na	ame						
2.	Organization Classification (please circle One)							
	Academic C	Career Technic	cal	Health Science	s Stuc	lent Life		
3.	List of Officers: President/Senat Vice President Secretary Treasurer Coronation Rep	·				Phone#		
4.	When are office	ers elected?_						
5.	Organization Ac	dvisor(s)						
6.	Regular Meeting time scheduled:							
7.	Statement of Club/Organization's Mission Statement:							
8.	Goals and objectives for the year (Can Attach to form)							
9.	Please list any s	pecial memb	ership	requirements fo	or students:	:		

10. Membership Information

(Please list the names and student numbers of students who are members or plan to become members of this club/organization. Please attach additional sheets if needed.)

	ion is composed of members who are stud ne organizations meet the criteria and defir					
I hereby voluntarily take responsibility fo	or providing the information on this form ar	d authorize the				
I hereby voluntarily take responsibility for providing the information on this form and authorize the Student Engagement Office and the Assistant Director of Student Engagement to release the						
information upon receipt of legitimate re						
Divisional Dean	Date					
Advisor	Date					
Assistant Director of Student Engagemen	nt Date					
Director of Student Engagement	Date					