

FLEMING SAC CLUB RENEWAL FORM



CLUB INFORMATION

Club Name: _____

Same purpose and mandate as the past year? Yes ☐ No ☐

If you answered no, please outline any amendments to your club purpose:

Please outline how you will use your funding for the upcoming year:

New Meeting Time and Day:

Day(s): _____

Time(s): _____

WHAT IDEAS DO YOU HAVE FOR EVENTS?

EVENT #1

Fundraiser ☐

Social ☐

Awareness / Educational ☐

Other ☐

Describe the Event:

EVENT #2

Fundraiser ☐

Social ☐

Awareness / Educational ☐

Other ☐

Describe the Event:

CLUB EXECUTIVE INFORMATION

President: Signing Authority? Yes ☐ No ☐

Name: _____

E-Mail Address: _____

Phone Number: _____

Student Number: _____

Signature: _____

Vice-President: Signing Authority? Yes ☐ No ☐

Name: _____

E-mail Address: _____

Phone Number: _____

Student Number: _____

Signature: _____

Treasurer: Signing Authority? Yes ☐ No ☐

Name: _____

E-mail Address: _____

Phone Number: _____

Student Number: _____

Signature: _____

MEMBERSHIP INFORMATION

	Member Name	Student #	Phone #	Email
1				
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