

Riverview High School

Student Activities

Club/Organization Registration Form

Please complete the information below and include bylaws for your club/organization

Club/Organization Name: <small>(please use whole name, not just an acronym)</small>	Purpose of Club/Organization:
Type of Club/Organization: <small>(please circle all that apply)</small> ACADEMIC SOCIAL ATHLETIC COMPETITIVE COMMUNITY SERVICE BASED	Are there qualifications for membership? YES NO If yes, please explain: Are there dues for this club? YES NO If so, how much:
Faculty Advisor(s): <small>(must be a Riverview High School faculty member)</small> Name(s): Signature(s): _____ <small>I understand as an advisor I am required to attend all club meetings/functions</small>	Student Leadership: <small>(please provide names of student contacts)</small>
Meeting Day(s) and Time:	Community members involved (if any):

For Office Use Only:

Date received _____	Approval _____	Bylaws Submitted _____
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