



## Student Organization/Club Registration

Date Received: \_\_\_\_\_ Initials \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of designated student leader submitting this form: \_\_\_\_\_

Has your group been registered before? ☐ Yes ☐ No If yes, when? \_\_\_\_\_

Previous name if different \_\_\_\_\_

If No, Please complete and attaché the **Request for establishing a new Organization form.**

Please describe your membership requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Organization Membership: Each club must have a minimum of 10 members. Members will be verified.

| Student Name |  | Student ID# | Student Name |  | Student ID# |
|--------------|--|-------------|--------------|--|-------------|
| 1            |  |             | 2            |  |             |
| 3            |  |             | 4            |  |             |
| 5            |  |             | 6            |  |             |
| 7            |  |             | 8            |  |             |
| 9            |  |             | 10           |  |             |

Please use a blank page or the back of this form for any additional member names.

Name of Advisor: \_\_\_\_\_

Advisor's Supervisor: \_\_\_\_\_

Signature of Advisor's Supervisor: \_\_\_\_\_

| Officer        | Name | GID# | Email | Phone# |
|----------------|------|------|-------|--------|
| President      |      |      |       |        |
| Vice President |      |      |       |        |
| Treasurer      |      |      |       |        |
| Secretary      |      |      |       |        |
|                |      |      |       |        |
|                |      |      |       |        |



Please attach the most current copy your constitution to your application.

- 1) This application is accurate. We will notify the SGA and SGA Advisor of any changes in this information.
- 2) The Student Government Association, in accordance with South Florida State College's policies and procedures, pledges to provide equal access to activities, events, and opportunities afforded all students regardless of race, color, religion, sex, national origin, age, disability, marital status, political affiliation, and sexual orientation. All groups operating on campus and recognized by the college are governed by this policy.
- 3) We have read and will comply with applicable campus policies and procedures as listed in the college manual.
- 4) No member of our organization will sign a contract on behalf of the college or act as an agent of South Florida State College.
- 5) In consideration of the privilege of registering as a student organization on campus, our organization and its individual members agree to defend, indemnify, and hold the college, its officers, employees, and agents harmless from and against any and all liability, loss, expense (including attorney's fees) or claims from injury or damages arising out of the activities' or events sponsored or engaged in by our organization, but only in proportion to and to the extent such liability loss, expense, attorney's fees, or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of our organization, its officers, agents, or members.

\_\_\_\_\_  
Signature of Student Leader/Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student Leader/Applicant

\_\_\_\_\_  
Date

Requires two signatures from each group, typically the President and Vice President

\_\_\_\_\_  
Signature of Coordinator, Student Life

\_\_\_\_\_  
Date