BIG BEND COMMUNITY COLLEGE

Recognition of Student CLUB

Date Submitted				
Before submitting this application be sure to: 1. Obtain signatures of the club president and faculty/staff advisor. 2. Attach current membership list (must be at least 10 active members). 3. Attach revisions in Constitution or By-Laws made during the past year.				
NAME OF CLUB				
OFFICERS				
Office	Name		SID	Phone
President				
Vice President				
Secretary				
Treasurer				
State or National Affiliations (if any)				
State or National Dues (if any)				
Time and place of meetings				
Purpose				
Requirements and/or limitations of membership				
Special Remarks				
I hereby request renewal of official recognition for the CLUB named above in order that it may continue to use the name and facilities of Big Bend Community College, and be eligible for ASB budget subsidization. I agree, for the CLUB, to observe and support the policies, regulations, and procedures of the College.				
Signature of Club President and date				
I am acquainted with the above-named organization, and the College regulations pertaining to Student Activities. I agree to serve in the following capacity:				
Signature of Club Advisor and date				
Renewal of Reco	gnition is: Approved 🗍	Denied 🗌	(Explanation attached	if denied)
Signature of ASB	President		Signature of Activities	Director