

ASMSA CLUB/ORGANIZATION SPONSORSHIP FORM

STUDENT SECTION

Club Name: _____

Club Sponsor (Faculty/Staff): _____

Co-Sponsor: _____

How often will this club meet?: _____

Meeting Dates/Time/Location: _____

Will this club make any trips off campus?: YES NO

Briefly describe the purpose of this club: _____

SPONSOR SECTION

Sponsor's Signature: _____ Phone Extension: _____

ADMINISTRATION SECTION

DEAN OF RESIDENTIAL AFFAIRS

APPROVAL DISAPPROVAL

Signature: _____ Date: _____

NOTE: Remember that all room reservation requests must go through the Secretary to the Dean of Residential Affairs. Clubs/Organizations are not guaranteed/granted use of ASMSA campus rooms for meeting and/or event purposes without having properly reserved them ahead of time.