

CORONA DEL SOL HIGH SCHOOL  
APPLICATION FOR  
CHARTERING      OR      RECHARTERING A CLUB

NAME OF CLUB \_\_\_\_\_

PURPOSE OF CLUB \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FACULTY SPONSOR \_\_\_\_\_ DEPT \_\_\_\_\_ ROOM # \_\_\_\_\_

MEMBERS: (10 REQUIRED)

FIRST NAME LAST NAME ID NUMBER \_\_\_\_\_

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

MEETING PLACE \_\_\_\_\_

MEETING DAYS AND TIMES \_\_\_\_\_

AMOUNT OF CLUB DUES PER SCHOOL YEAR \_\_\_\_\_

OFFICERS: (FOR RECHARTERING CLUBS ONLY)

PRESIDENT: \_\_\_\_\_ ID # \_\_\_\_\_

VICE PRESIDENT: \_\_\_\_\_ ID # \_\_\_\_\_

SECRETARY: \_\_\_\_\_ ID # \_\_\_\_\_

TREASURER: \_\_\_\_\_ ID # \_\_\_\_\_

DEADLINE TO APPLY FOR CHARTERING OR RECHARTERING IS SEPTEMBER 25TH. PLEASE RETURN FORM TO ACTIVITIES DESK.

APPROVED BY: \_\_\_\_\_ ASSISTANT PRINCIPAL DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ STUDENT COUNCIL DATE: \_\_\_\_\_