## **Barstow Community College Club/Advisor Application**

Name of activity or	club:
Advisor or Faculty/S	taff contact person:
Office #	Extension
	tact person:
Address of c	ontact:
Date of appli	cation:
Phone numb	er: Email:
Objective of activity	or club:
	Campus Club
Official Club	s on campus must:
	a minimum of 2x per month
	meeting minutes to Director of Student Life
	officers: President, Vice-President, Treasurer, Secretary, and six members
Have	club constitution on file with the office of Student Life and Development
Camp	ous clubs receive \$500 upon approval of the AGS
Activities your grou	o may sponsor:
	y or club benefit its members?
Club members name	s, addresses, email addresses and phone numbers (please use back side if ave at least six students to start a club**
*Dlagge gulen:	t form to the office of Student Life and Davidsment, igancia @harston; adv
i icase subilli	t form to the office of Student Life and Development: <u>jgarcia@barstow.edu</u>



