HOCKING COLLEGE

NEW CLUB REGISTRATION FORM

Club Name: _____ Date: _____

Faculty/Staff Advisor's name: _____ Initial # of Members: _____

Club Description: _____ Description of Anticipated Activities: _____

Printed Name & Signature of Student 1: _____ PRINT _____ SIGN

Printed Name & Signature of Student 2: _____ PRINT _____ SIGN

Printed Name & Signature of Club Advisor: _____ PRINT _____ SIGN

APPROVALS:

Vice President of Student Experience & Success Support Services

Director, Student Activities:

Fiscal Office:

Cabinet:

HOCKING COLLEGE

Hocking College Club Roster

Please list all club members below:

HOCKING COLLEGE

Hocking College Club Registration Assessment

These questions are to be completed by the club president and advisor annually to maintain active status at Hocking College.

SECTION I: PURPOSE & GOALS

What is the primary purpose and mission of your club?

How will your club contribute to the overall campus community?

SECTION II: MEMBERSHIP & LEADERSHIP

Who is eligible to join your club? Are there any specific requirements?

How will you select and train your club's officers and leaders?

SECTION III: ACTIVITIES & EVENTS

What types of activities and events does your club plan to organize?

How will you ensure that all planned activities are safe and legal?

SECTION IV: RISK MANAGEMENT & SAFETY

How will you identify and assess potential risks associated with your club's activities?

How will you educate your club members about the dangers and consequences of hazing?

SECTION V: COMMUNICATION

How will you communicate effectively with club members, advisors, and the college community?