

Logan Student Government Club Form

Trimester/Year (i.e. Spring 1978):		
Club/Organization:		
Purpose:		
President:	Trimester:	Contact Number:
Vice President:	Trimester:	Contact Number:
Secretary:	Trimester:	Contact Number:
Treasurer:	Trimester:	Contact Number:
Meeting Day(s): 1 st Choice:		2 nd Choice:
Meeting Time:		
Meeting Room: 1 st Choice:		2 nd Choice:
Is this a closed meeting? (i.e. no one except	club members allo	owed in the room during the time of the meeting.) [] Yes
Signatures:		
Faculty Advisor: (please print):		
Faculty Advisor Signature:		
Logan Student Government President Signat	:ure:	
Dean of Students Signature:		

List of All Active Members:

1.	21.	
2.	22.	
3.	23.	
4.	24.	
5.	25.	
6.	26.	
7.	27.	
	28.	
	29.	
	30.	
	31.	
	32.	
	33.	
	34.	
	35.	
	36.	
17.		
	38.	