

**Registered Student Organization (RSO)
(RE)-REGISTRATION FORM 2009-2010**

Section A- RSO INFORMATION

Name of RSO :(full name) _____

Do you have affiliations with any local/national organizations? Yes No

If yes, what organization? _____

Do you have regularly scheduled meetings? Yes No

If yes, when & where are they?

Do you intend to collect dues/funds? Yes No

If yes, how much are club dues? _____

RSOs are required to have an on-campus club account if collecting funds. The Office of Student Involvement will set this up for you if you circle yes.

Purpose of the organization: (you may attach a separate sheet; this will be posted online as an introduction to your club)

Section B- MEMBERSHIP & CONTACT INFORMATION:

RSOs are required to have at least five (5) active student members and one (1) advisor at all times. Active student members must be enrolled in at least 1 credit at WSU Vancouver.

ADVISOR CONTACT:

RSO Advisor: _____ Status: (circle one) Faculty Staff

Email: _____ Phone: _____

Signature: _____

STUDENT CONTACT:

By signing below, I acknowledge I am listed as an active member of the stated Registered Student Organization. I will uphold the policies and procedures associated with being a RSO, will serve as a contact for the RSO, and will notify OSI if any changes occur within the RSO leadership, status, or Constitution.

1. RSO President/Main Contact: _____

Email: _____ Phone: _____

NetID: _____ Student ID #: _____

Signature: _____

Return completed form to:

The Office of Student Involvement in VFSC by October 9, 2009 (for Fall registration).
Office of Student Involvement www.vancouver.wsu.edu/involvement 360.546.9527

2. Student: _____ Email: _____

Phone: _____ NetID: _____

Status: (please circle) Member Officer:(position) _____

Student ID #: _____ Signature: _____

3. Student: _____ Email: _____

Phone: _____ NetID: _____

Status: (please circle) Member Officer:(position) _____

Student ID #: _____ Signature: _____

4. Student: _____ Email: _____

Phone: _____ NetID: _____

Status: (please circle) Member Officer:(position) _____

Student ID #: _____ Signature: _____

5. Student: _____ Email: _____

Phone: _____ NetID: _____

Status: (please circle) Member Officer:(position) _____

Student ID #: _____ Signature: _____

To be completed by OSI staff:

- | | |
|--|---|
| <input type="checkbox"/> Registration form completed | <input type="checkbox"/> All students are enrolled at WSU Vancouver |
| <input type="checkbox"/> Constitution received & approved | <input type="checkbox"/> Attended RSO Orientation |
| <input type="checkbox"/> RSO considered active as of _____ | <input type="checkbox"/> Club status sent to President/Main, Advisor, Scheduler |
| <input type="checkbox"/> RSO Account created | <input type="checkbox"/> Account # _____ |

NOTES: