

STUDENT CLUB FORMATION FORM Coopersville High School 2019-2020

Complete form and submit to CHS administration for approval. Written notice of approval or denial will be communicated to the student applicant and sponsor within 10 school days.

Applying to be (circle one):

Curricular Club

Non Curricular Club

STUDENT NAME: _____

CLUB NAME:_____

STATEMENT OF CLUB'S PURPOSE, GOALS, AND ACTIVITIES:

CLUB CATEGORIZATION (circle all that may apply): Agriculture Gaming Art/Music/Performance Religious Athletic Science Business/Economic Community Service/Social Justice Other:

TENTATIVE SCHEDULE OF CLUB ACTIVITIES

Time: _____

Date: _____

Place: _____

PERSONAL COSTS ASSOCIATED WITH THE CLUB (if any):

CLUB SPONSOR OR SUPERVISOR

Sponsor Name (Curricular Club Faculty Member): _____

Supervisor Name (Noncurricular Club Faculty Member):_____