

**CLUB REGISTRATION FORM**

Please take some time so fill out the following form. All information is required. All registering Clubs/Societies must submit the required documentation in order to become an official GSA Club/Society. The GSA Office has the right to refuse applications if the Club doesn’t meet the recognition requirement. For any questions or concerns, please contact the VP Services using the email [gsavpserv@mcmaster.ca](mailto:gsavpserv@mcmaster.ca).

**1. Name of Club or Society**

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**2. Public contact details**

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| --- | --- | --- | --- |
| Name of main contact   |  | | --- | |  | | Telephone   |  | | --- | |  | |
| Postal address / PO Box   |  | | --- | |  | | Email address   |  | | --- | |  | |
| Other contact   |  | | --- | |  | | Website Address   |  | | --- | |  | |
| Principal Location   |  | | --- | |  |   Community Members     |  | | --- | |  |   Undergraduate Members   |  | | --- | |  | | Other Locations   |  | | --- | |  |   GSA Members   |  | | --- | |  | |

**3. Give a brief description of the Club or Society’s primary objective(s) and activities. This information will appear on the Clubs Website (maximum of 300 words).**

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**4. What would be the additional value that the Club would bring to the GSA by being recognized? (Maximum of 200 words)**

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**5. Membership and fee subscription**

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| Number of current students |  |
| Number of Executives |  |
| **Total Membership of Club** |  |

**6. Executives Contacts**

Each Club must have a minimum of four Executive Members, including the President.

The contacts you provide here will not be publicly available. All details are required

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| **Signing Officer #1 Name** |  |
| **Position** |  |
| **Student ID** |  |
| **Email address** |  |
| **Phone number(s)** |  |

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| --- | --- |
| **Signing Officer #2 Name** |  |
| **Position** |  |
| **Student ID** |  |
| **Email address** |  |
| **Phone number(s)** |  |

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| **Signing Officer #3 Name** |  |
| **Position** |  |
| **Student ID** |  |
| **Email address** |  |
| **Phone number(s)** |  |
| **Signing Officer #4 Name** |  |
| **Position** |  |
| **Student ID** |  |
| **Email address** |  |
| **Phone number(s)** |  |

**Other committee members**

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| --- | --- |
| **Name** | **Student ID (if applicable)** |
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**7. Banking Information (if applicable)**

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| **Name of the Bank** |  |
| **Account number** |  |

**8. Associations with Outside Groups**

Please, state the name(s) of any external organization involved with your Club or Society in any way.

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**Current Student Club Membership**

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| **First Name** | **Last Name** | **Student Number** |
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