

Appendix 1
Fanshawe Student Union
Club Charter



Please fill out this form and return to the FSU main office – Room SC2001, along with a list of club members (including their name, student number, email address, and phone number).

Name of Club: _____
(please spell out short forms)

Type of Club:
(refer to the Club Policy, Section 1.1.2, for definitions of these club types)

Common Interest Group Program Association Cultural/Religious Group Community Service
 Campus Chapter Group Other *(please explain)* _____

Describe the goal of the club:

Provide some examples of club activities:

To form a club, there must be a President and Vice President. Additionally, two Signing Officers are required for clubs with funding. Only one of these signing officers can be the President or Vice President.

President's Name: _____ Student Number: _____

Email Address: _____ Phone Number: _____

Vice President's Name: _____ Student Number: _____

Email Address: _____ Phone Number: _____

Signing Officers:

Signing Officer 1: _____ Student Number: _____

Email Address: _____ Phone Number: _____

Signing Officer 2: _____ Student Number: _____

Email Address: _____ Phone Number: _____

If the club has other leadership positions (example: Secretary, Treasurer, etc.) please make note of these individuals below. These positions are OPTIONAL.

Name of Position: _____	
Person's Name: _____	Student Number: _____
Email Address: _____	Phone Number: _____
Name of Position: _____	
Person's Name: _____	Student Number: _____
Email Address: _____	Phone Number: _____

Include additional information for the www.fsu.ca/clubs online listing here. This may also be added to the charter after the club is ratified. Club logos must be sent via email if you would like them included in your listing (pending approval). These images must be PDF or high-resolution PNG:

Club Email Address: _____
Club Facebook Page/Group: _____
Include any other online/social media information here: _____

If the club is a Program Association or has a Faculty/Staff Advisor, fill below:

Name of Department/Academic School: _____	
Contact Name: _____	Phone Extension: _____
Email Address: _____	

If the club is an on-campus chapter or partnered/affiliated with any professional association/business, fill below and attach a copy of the organization's Certificate of Liability Insurance:

Name of Organization: _____	
Contact Name: _____	Phone Number: _____
Email Address: _____	

Charter Submitted By: _____	
Name: _____	Signature: _____

For Office Use Only:	
Submitted To: _____	Date Received: _____
Student Numbers Checked By: _____	
Date of Approval: _____	Meeting #: _____
FSU Signature: _____	