CURRICULUM	Must also complete a new club charter application and wait for school administration and district board approval.
Club Name:	Date:
Mission Statement:	
President Name:	
Cell Number:	
Email Address:	
Signature:	
Presidency Information	
Name, Title, Email:	-
Regular Meeting Day, Time, Fonce a month, etc.):	requency (weekly, every other week,
Advisor Name:	
Cianaturo.	

Turn in fully completed form to Mrs. Holt, room 110 by Tuesday, September 17 no later than 2:45pm