

ASCWU Club Renewal Packet

Club Name:

Step 1: Fill out membership information, contact information, and club description.

Step 2: All members read Insurance Form and Alcohol Agreement Form, then sign the acknowledgment.

Remove the following items from the packet, and turn in to the ASCWU office:
- Insurance Form
- Alcohol Agreement Form
- Acknowledgment Form

Membership Information

Name of Club or Organization:

Recognition Year:

Contact Information

	Name:	Phone Number:	Email:
Advisor			
President			
Vice-President			
Secretary			
Treasurer			
Senator			

Club Description:

Please give a description of your club or organization. Try to include the following:

- The purpose of your club. (What do you do/what to you stand for).
- Any goals for your club. (What are you striving towards).
- Any other related information that may interest prospective members.

This "Club Description" will be published on the Club Senate Website, as well as distributed in print and electronic forms to all interested students looking to find and join ASCWU recognized clubs. It will also be available to the public on the Club Database.

Description:



Associated Students of CWU
Student Government
Central Washington University

ACKNOWLEDGEMENT OF RISK AND HOLD HARMLESS AGREEMENT

I hereby acknowledge that I have voluntarily chosen to participate in the authorized student club (hereinafter called "club") stated below.

I understand the risks involved with my participation in the authorized student club. I recognize that the club and its activities involves risk of injury and I agree to accept any and all risks associated with it, including but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death. Furthermore, I recognize that participation in the club involves activities and risks incidental thereto, including but not limited to, physical exertion for which I am not prepared, forces of nature; travel, whether in civilized or remote, domestic or international areas, by plane, train, auto, boat or other conveyance, or on bicycle, horseback, sky, by foot or other form of active travel, civil unrest, terrorism, breakdown of equipment; fundraising, competitions, practices, community service projects, accident or illness without access to means of rapid evacuation or availability of medical supplies; limited availability of medical assistance and the possible reckless conduct of other participants. I am voluntarily participating in the club activities with the knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, bodily injury, or death

In consideration of my participation in the club and to the fullest extent permitted by law, I agree to indemnify, defend and hold harmless Central Washington University, its trustees, officers, directors, employees, agents and volunteers and the Associated Students of Central Washington University Board of Directors (ASCWU), its officers, agents, employees, volunteers from and against all claims arising out of or resulting from my participation in the below named. (Claim as used in this agreement means any financial loss, claim, sue, action, damage or expense, including but not limited to attorney's fees, attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from. In addition, I hereby voluntarily hold harmless Central Washington University, its trustees, officers, directors, employees, agents, volunteers and assigns from any and all claims, both present and future, that may be made by me, my family, estate, heirs or assigns

I also understand that Central Washington University does not provide any medical, dental, or life insurance to cover bodily injury, illness or death, nor insurance for personal property damage or loss, nor insurance for liability arising out of my or my clubs negligent acts or omissions, and I acknowledge that I am completely responsible for my own insurance to cover these expenses.

I further understand that this assumption of risk and hold harmless is intended to be as broad and inclusive as permitted by the laws of the State of Washington and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding continue in full legal force and effect.

All members must sign the Acknowledgment of Risk and Hold Harmless Agreement form on the page after next.



Associated Students of CWU
Student Government
Central Washington University



Associated Students of CWU
Clubs & Organizations

Alcohol Guidelines and Agreement

As a recognized club or organization of the ASCWU, you are representing Central Washington University at all times. Keep this in mind while attending, promoting and planning all events.

- Your club or organization should be aware of the potential risks of the use of alcohol during trips and / or meetings. The club/organization and its members are responsible for their actions while on trips and activities and are expected to act in a responsible manner that is consistent with the laws of the United States, Washington State and Central Washington University.
- The use of State vehicles to transport alcohol, or to transport persons to and from establishments with the primary purpose of selling alcohol, is prohibited.
- It is expected that all recognized Central Washington University clubs/organizations will behave in a responsible manor in regards to drinking and driving, and will work to assure a safe ride home for those intoxicated.
- The Senate for Student Organizations wants to promote the idea of “Responsible Freedom” and allow clubs/organizations to participate in any activity in which they choose. However, we ask you to remember that you are representing Central Washington University in all activities in which you participate.

All members must sign the Alcohol Guidelines and Agreement form on the next page.

This page is intentionally blank to allow the
ACCOUNTING & SCHEDULING CLUB/ORG
AUTHORIZED SIGNATURE LIST
to print on a separate page.

ACCOUNTING & SCHEDULING CLUB/ORG AUTHORIZED SIGNATURE LIST

Please complete fully in ink and return form to SURC Accounting, SURC 250. Questions? 509 963-3034

Club/Org Name: _____ Effective Dates: From _____ To 9/30/2020
Month, day, year

For Club Accounting Transactions: Please designate at least two members/officers (not including your advisor) to be responsible for spending club/org monies by filling in the boxes below, and designate the recipient of any remaining funds should the club disband or fail to be recognized for a period of three years. Two Club members authorized to sign for accounting transactions must sign authorizing the club's choice.

The Club/Org designates the selected fund(s) below to receive any monies held in trust by the Accounting Office should the Club/Org disband or fail to be recognized for a period of three years.

S&A Academic Senate ASCWU Student Govt Club Senate ASCWU Student Scholarship Fund

Signature of authorized Club member

Signature of authorized Club member

For Scheduling Reservations: Please designate two members/officers (not including your advisor) to be responsible for scheduling all spaces for club use by filling in the boxes below.

1 Name (please print legibly)	CWU Email	Office held	Phone number
_____	_____	Advisor _____	_____
Signature	Authorized for:		
	Accounting <input checked="" type="checkbox"/>	Scheduling <input checked="" type="checkbox"/>	

2 Name (please print legibly)	CWU Email	Office held	Phone number
_____	_____	_____	_____
Signature	Authorized for:		
	Accounting <input checked="" type="checkbox"/>	Scheduling <input checked="" type="checkbox"/>	

3 Name (please print legibly)	CWU Email	Office held	Phone number
_____	_____	_____	_____
Signature	Authorized for:		
	Accounting <input checked="" type="checkbox"/>	Scheduling <input checked="" type="checkbox"/>	

4 Name (please print legibly)	CWU Email	Office held	Phone number
_____	_____	_____	_____
Signature	Authorized for:		
	Accounting <input checked="" type="checkbox"/>		

5 Name (please print legibly)	CWU Email	Office held	Phone number
_____	_____	_____	_____
Signature	Authorized for:		
	Accounting <input checked="" type="checkbox"/>		

To add additional members/officers for club accounting transactions, please add them to the back following the format above.
 SURC Accounting