



# MURRAY STATE UNIVERSITY

Center for Student Involvement

For Office Use Only

Date Received\_\_\_\_\_

Data Updated\_\_\_\_\_

Staff Initials\_\_\_\_\_

2017 - 2018

## STUDENT ORGANIZATION REGISTRATION PACKET

Please PRINT CLEARLY

Please Complete All that Apply

New Organization

Annual Re-Registration

Organization Name \_\_\_\_\_

Acronym for Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Name of President \_\_\_\_\_ When do you leave office? \_\_\_\_\_

President's Phone No. \_\_\_\_\_ Email \_\_\_\_\_

Name of Campus Advisor \_\_\_\_\_ Department \_\_\_\_\_

Advisor's Phone No. \_\_\_\_\_ Email \_\_\_\_\_

Organization's Email \_\_\_\_\_

Organization's Web Address \_\_\_\_\_

**Please Check ONE organization type that most closely defines your organization:**

Open (*Open to all students*)

Greek Letter Social

Greek

Departmental

Residential

Professional

Sports/Recreation

Honor Society

Political

Environmental

Religious

International

Service

Please Contact:  
Christian Barnes  
*Student Office Coordinator*

Address:  
111 Curris Center  
Murray, KY 42071

Phone/Fax:  
270.809.6349  
270.809.6952

Email:  
msu.studentorganizations  
@murraystate.edu



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**Statement of Purpose:** *(In 50 words or less, please describe purpose of organization...This will be published online)*

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**Constitution Confirmation Statement:**

*Please Check Appropriate Statement*

- I certify that our constitution and/or bylaws **have NOT changed**; Please pull copies from last year's file.
- Our constitution and/or bylaws **have changed** from last year; Attached is an updated copy.

***Please Read Carefully and Sign Below:***

**Use of Campus Space Agreement:**

By signing, you agree that if any building or university policies are broken by or through the use of a Registered Student Organization, the organization, then, waives their rights to use any university buildings.

**Acknowledgement Statement:**

I certify that the above information is accurate, and I acknowledge my responsibility to keep this record correct by informing the *Office for Registered Student Organizations* of any changes in the information and/or in our constitution and/or bylaws. I also give permission for this information to be distributed by the *Office for Registered Student Organizations* in their website directory and office publications.

President's Signature \_\_\_\_\_

Advisor's Signature \_\_\_\_\_

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## OFFICER ACKNOWLEDGEMENT AGREEMENT

*\*\*\* Must Provide Organization's FULL NAME*

As officers of \_\_\_\_\_ we acknowledge the following:

1. We have read and understand the Hazing & Advisory Support Statements.
2. We have read and understand the policy and definitions on hazing; we certify that all pledges, associate members and members' activities, pre-initiation activities and activation activities of our organization do not violate university policies and that any and all forms of hazing or other degrading activities are not permitted and will not occur.
3. We understand that assistance in defining the university policy and in formulating challenging and constructive membership programs and pre-initiation activities are available through the Center for Student Involvement.
4. We understand that organization presidents and other officers can and have been held responsible for injuries to pledge/associate members and other members resulting from hazing activities;
5. We certify that membership is limited to students, faculty and staff of the University;
6. We certify that there is no discrimination in membership selection unless stated legal purposes of the organization require limitations to sex or religion;
7. We certify that the organization will abide by the regulations of the laws of the land.

### Signatures of the Officers

_____ President's Name	_____ President's Signature	_____ Date
_____ Vice President's Name	_____ Vice President's Signature	_____ Date
_____ Secretary's Name	_____ Secretary's Signature	_____ Date
_____ Treasurer's Name	_____ Treasurer's Signature	_____ Date

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**ADVISORY SUPPORT STATEMENT**

The university recognizes the importance of student clubs and organizations in providing laboratories for learning, social contact, and leadership development. Advisors are important contributors of support and advice to these groups. This statement is provided to help clubs and organizations better understand the role of advisors at Murray State University.

Each club must understand that the collective group is responsible for compliance with all applicable rules and regulations of the university as well as state and federal laws. Individual members are responsible for their own behavior.

Advisors are volunteers and do not control the clubs. Their role is one of support. They provide advice, recommendations and suggestions when asked. The advisor does not assume to take responsibility for actions or conduct of club members.

**Pledge of Advisory Support**

All persons pledging advisory support to any student organization must have full-time staff or faculty status at Murray State University. This policy is for official recognition purposes only. It does not preclude a graduate student or an interested adult from advising any student organization. However, these individuals cannot be used for official recognition required by the Murray State Board of Regents. If you wish to pledge your name and support, complete the following statement:

I, \_\_\_\_\_, have read the Advisory Support

Statement, and agreed to serve as advisor to \_\_\_\_\_

for the \_\_\_\_\_ academic year. If any changes occur, I will immediately contact the

*Office for Registered Student Organizations at 270-809-6953.*

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**CSI RESOURCE CENTER USER AGREEMENT CONTRACT**

The Center for Student Involvement Resource Center, located in room 111 of the Curris Center, is designed to provide student organizations a place to manage student organization business and complete organization projects. The Resource Center is equipped with materials and machinery for printing and sign painting as well as other common office supplies. In addition, computer access is also available in the Resource Center.

The Resource Center is designed specifically for use by student organizations and may not be used for non-related activities. Each organization can authorize up to 5 members to use the Resource Center. Their names must be turned in with this agreement.

The Resource Center will have a student worker/graduate assistant present at all times to monitor and assist students who wish to use the provided equipment. No member will be able to use the Resource Center if not accompanied by an authorized student worker/graduate assistant. Annual limits per organization will be strictly enforced. All use will be documented by the Center for Student Involvement. Members will be able to review the use of their respective organization by asking one of the assistants.

RSO's assume responsibility for any equipment used as well as any materials that are checked out by student representatives of their organization.

As President of this organization, I am aware of the policies that will be enforced in regards to using the CSI Resource Center. I realize that failure to adhere to these policies will result in suspended use of the Center. I also authorize the members listed below to use the Resource Center on behalf of my organization (*please include your name also on the bottom if you wish to be an authorized user*).

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Organization (FULL NAME)

**Authorized Users:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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