

Complete and return to:
Yuba College Campus Life
2088 North Beale Road
Marysville CA 95901
office: 530-741-6992
fax: 530-749-3884

Campus Life

Student Club

Membership Report

Club Name _____ Academic Year _____

Secretary _____ Date _____

In order to function as a valid club, 2-Year Chartered Clubs in their Second Year must submit this report, accompanied by club minutes approving officers, at the start of the academic year.

OFFICERS

Name	<input type="text"/>	ID	<input type="text"/>	Position	<input type="text"/>	E-mail	<input type="text"/>
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Name	<input type="text"/>	ID	<input type="text"/>	Position	<input type="text"/>	E-mail	<input type="text"/>

MEMBERS

Name	<input type="text"/>	ID	<input type="text"/>	Name	<input type="text"/>	ID	<input type="text"/>
Name	<input type="text"/>	ID	<input type="text"/>	Name	<input type="text"/>	ID	<input type="text"/>
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ADVISOR