

WPI STUDENT ORGANIZATION INFORMATION UPDATE FORM

Student Activities Office

2009-2010

Please complete this form as accurately as possible. It is used to provide contact information about your organization to interested students and departments. **Completion and submission of this form is required as part of WPI's ANNUAL recognition process for your organization. RETURN TO SAO BY OCTOBER 1, 2009.**

Name of Club/Organization _____ Org. email: _____

LIST OF OFFICERS				REQUEST ACCESS TO <input checked="" type="checkbox"/> A LOCKER BELOW	
Title	Name	E-Mail	Phone #	Check below	
President	_____	_____	_____	YES	NO
Vice-President	_____	_____	_____	YES	NO
Secretary	_____	_____	_____	YES	NO
Treasurer	_____	_____	_____	YES	NO
Other (specify)	_____	_____	_____	YES	NO
_____	_____	_____	_____	Locker #	
_____	_____	_____	_____	Locker #	

Treasurer ID Number for Organization Budget Access through Banner _____

	Name	E-Mail	Phone #
Advisor (s)	_____	_____	_____
	_____	_____	_____
Coach (if any)	_____	_____	_____

Student Organization Photocopier Renewal

Date: _____ Account Number Information: Fund _____ Org: _____

Organization agrees that its account will be billed .07 per copy at the end of B & D terms. _____

Signatures: Organization President: _____ Date: _____

Organization Treasurer: _____ Date: _____

SAO Staff Member: _____ Date Assigned: _____

Username Assigned: _____ Password Assigned: _____

Please complete this form and return to: *WPI Student Activities Office, Campus Center 3rd Floor
100 Institute Road, Worcester, MA 01609-2280
This form is due to SAO by October 1, 2009*

For Office Use Only:

Date Received:	Received by:	Treasurer: _____	Locker _____
		Photocopier: _____	

9/4/2009