Student Organization Registration Application
2009-2010

PLEASE TYPE OR PRINT NEATLY. Incomplete forms will not be accepted.

Check One:
___New Organization   ____Annual Re-Registration

Name of Organization:_____________________________________________________

Acronym of Organization (if applicable):_____________________

If the name has changed, what was the previous name?____________________________

Mailing Address:__________________________________________________________

Email Address:___________________________________________________________

Website Address:_________________________________________________________

Check appropriate response:

☐ I certify that our constitution and 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.

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

President’s Signature_______________________ Advisor’s Signature_______________

Advisor’s Name:__________________________ Department:_____________________

Phone Number:__________________________ Email:____________________________

President’s Name:______________________________________________________

Phone Number:__________________________ Email:____________________________

For Office Use Only

Date Received________

Database Updated_____

Staff Initials__________
Please check one organization type that most closely defines your organization:

___ Club Sports ___ Professional
___ Departmental ___ Open
___ Environmental ___ Recreational
___ Fraternity ___ Religious
___ Greek Letter Social ___ Residence Hall
___ Honor Society ___ Service
___ International ___ Sorority
___ Political ___ Other

STATEMENT OF PURPOSE: Briefly describe the purpose of your organization. Be as precise as possible since this statement will be published online and in our office publications.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Approximate Number of Members:_______________ Month Officers are Elected:_______

Group is comprised of: (check one) ___Undergraduate ___ Graduate ___ Both
Club and Organization Registration Process

Any student organization wishing to use university facilities or property, the university name or to solicit membership on campus must be a registered Student Organization with the Student Organizations Office no later than the third Friday in September of each academic year.

A copy of the organization’s constitution or clear statement of purpose and requirements and obligations of members must accompany the registration form. Also included must be a statement that (1) membership is limited to students, faculty, and staff of the university and their immediate families; (2) there is no discrimination in membership selection unless stated legal purposes of the organization require limitations to sex, or religion; (3) the organization will abide by the regulations of the laws of the land.

Newly formed student organizations may register at any time during the school year and may hold two meetings on campus for organizational purposes prior to registering with the university. Any student organization may be denied registration privileges or have its registration withdrawn if it is determined through established review processes that the goals and purposes of the organization are in conflict with the goals and purposes of the university.

Statement on Hazing

Murray State University recognizes that student organizations exist for the purpose of extending opportunities for education, social interaction, leadership and skill development, and personal growth beyond the classroom. Therefore, the practice of hazing pledges, associate members, initiates or members is antithetical to the purposes of the registered student organizations at Murray State University and is strictly prohibited by the university.

Furthermore, as of July 1986, hazing is a violation of Chapter 164 of Kentucky Revised Statutes. In pertinent part, the statute reads as follows:

“(This statute) prohibits any action or situation which recklessly or intentionally endangers mental or physical health or involves the forced consumption of liquor or drugs for the purpose of initiation or affiliation with any organization… In the case of a student or faculty violator (violation of this statute shall result in) his suspension, expulsion or other appropriate disciplinary action and, in the case of an organization which authorizes such conduct, (violation shall result in) revocation of permission for that organization to operate on campus property. Such penalties shall be in addition to any penalty pursuant to the penal law or any other chapter (of Kentucky Revised Statutes) to which a violator or organization may be subjected."

Specifically on the campus of Murray State University, hazing is defined as any on-campus or off-campus activity which results in mental or physical harassment, humiliation, degradation, ridicule, shock, endangerment, physical disfigurement, excessive fatigue, danger to health or the involuntary consumption of alcohol or drugs. This prohibition against hazing applies equally to student organizations, individual students, faculty, staff members, visitors to the campus, and licensees and invitees on the campus.

Any student who participates in hazing as defined above has violated the Murray State University Code of Conduct and will be subject to disciplinary action as described in the Standard in Disciplinary Proceedings of the Student Life Policies of the Student Life Handbook.
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 Student Organization Office at 809-6953.

Signature: ________________________________ Date: ______________
Officer Acknowledgement Agreement

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 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 and their immediate families;
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 (Print) ___________________________ President’s Signature ________________ Date: _______

Vice President’s Name (Print) ___________________________ Vice President’s Signature ________________ Date: _______

Secretary’s Name (Print) ___________________________ Secretary’s Signature ________________ Date: _______

Treasurer’s Name (Print) ___________________________ Treasurer’s Signature ________________ Date: _______

Murray State University
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