

INTEREST GROUP INFORMATION AND ADVISOR AGREEMENT FORM



Interest Group Name: _____
Please Print

Designated Student Representative(s): _____
Please Print

Interest Group Advisor: _____
Please Print

Purpose of Group:

Please read and sign the following:

I, the Interest Group Founder, hereby acknowledge the Interest Group Guidelines & Regulations of the Newbury Park High School ASB. I will fully abide by these regulations in order to maintain the integrity of the group that I represent and the integrity of Newbury Park High School. I will ensure that my Interest Group will follow all guidelines and regulations.

Designated Student Representative Signature Date Student Representative's Email

I, the Interest Group Advisor, do agree to sponsor the above interest group and observe all meetings. I agree to allow the use of my room on the below day for club meetings. I agree to follow the responsibilities of an Interest Group Advisor.

Interest Group Advisor Signature Interest Group Advisor Printed Name Date

Location of Meetings Day of Meetings Weekly/Bi-Monthly/Monthly Time of Meetings

