

THE UNIVERSITY OF TEXAS AT SAN ANTONIO

FACULTY OR STAFF ORGANIZATION REGISTRATION

1. Name of Organization:	2. Local Address	3. Telephone:
4. Complete list of the Officers and Representatives (attach additional page if necessary):		
<u>NAME</u>	<u>UNIVERSITY TITLE</u>	<u>CAMPUS ADDRESS</u>
	<u>EXT. NO.</u>	<u>OFFICIAL TITLE IN ORGANIZATION</u>
		<u>HOME MAILING ADDRESS</u>
		<u>HOME TELEPHONE</u>
5. Qualifications for Membership:		
6. List National or State Affiliations:		
7. General Statement of Organization's Purpose:		
8. In signing and filing this statement as an official representative, I accept responsibility by, and on behalf of the organization for the proper use, cleanup, or payment of costs, if any, of the University spaces, facilities, or services used, and for conducting activities in the manner authorized by the University. The Vice President for Business Affairs shall be immediately informed of any changes in the list of responsible officers and representatives.		
9. I further certify that the above named organization permits membership without impermissible discrimination on the basis of race, color, national origin, religion, sex, age, veteran status or disability.		
10. An Affidavit, which is attached, states that the organization does not presently have, nor during any period or registration will it have, as a member, any person who is not a member of the faculty or staff of the University.		
11. I understand that the failure to comply with the above responsibilities may result in withdrawal rights to the use of the University facilities.		
12. Signature of Official Representative:	13. Title:	14. Date:
APPROVED: Vice President for Academic Affairs (Faculty Organizations) Vice President for Business Affairs (Staff Organizations)		Date Approved:
Original to: Vice President for Academic Affairs (Faculty Organizations) Vice President for Business Affairs (Staff Organizations)		Copy to: Requesting Organization