	Student Club/Organization Membership Roster		
OCEAN COUNTY COLLEGE	Incoming Officers		
STUDENT LIFE			
Name of Club/Organization	:		
Name of Club Advisor(s):			
What is the purpose of your club?			
	& Objectives for the coming year? What do you hope to		
	STUDENT ID#		
HOME ADDRESS:			
PHONE: ()			
EMAIL:			
	STUDENT ID#		
HOME ADDRESS:			
PHONE: ()			
EMAIL:			
SECRETARY:	STUDENT ID#		
HOME ADDRESS:			
PHONE: ()			
	STUDENT ID#		
HOME ADDRESS:			
PHONE ()			
EMAIL:			



Student Club/Organization Membership Roster

Membership Roster

INSTRUCTIONS: This roster must be filed in the Student Life Office no later than the fourth (4th) week of classes, each semester, by all officially recognized OCC student organizations. A minimum of 10 OCC students must sign below in order for the organization's status to be considered active.

This roster is for: Fall semester _____ Spring Semester_____

Organization's name: _____

Listing of all members. Members must be currently enrolled students.

Name (type or print clearly)	Student ID #
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Submitted by:	
Title:	
Date:	