

Student Club Honorarium Form

Presenter Information

Name:			College ID#: (SS# if no college ID)		
				(SS# if no college ID)	
Address:					
		(str	eet)		
	(town)		(state)	(zip)	
Contact Tele	phone:				
Contact Ema	il Address: _				
Program In	<u>formation</u>				
Club Organiz	zing Progran	1:			
Topic:					
Location:					
Reserved wit	h:				
Honorarium	Amount:				
		a	grees to the above inf	formation for the presentation	
to be given fo	r				
-		(club or	organization name)		
Presenter's Signature:				Date:	
	Mailed	Picked up by:			
(check one)	Donated bac	k to club scholarship fun	d		

Send completed forms to Student Life office for processing.

College Employees must receive board approval to receive honorariums. Please consider the extra time required for this step when submitting this form.