Alpharetta High School
Club Application Form 2019-20

Each club application must be completed and submitted by the representing member of AHS faculty prior to the dates listed below. All clubs must first gain representation before submitting this application; it is the responsibility of the student group to gain this representation.

Club applications will be reviewed twice annually as indicated below. All club activities must be approved by the school administrative team, applications submitted after the dates listed below will be withheld until the following semester. Once your club has gained approval it will be added to the school’s website.

Club Application Deadline for Fall Semester: September 6th 4:00pm
Club Application Deadline for Spring Semester: January 31st 4:00pm

Faculty Representative: ____________________________________________

Position: _______________________________________________________

Name of Club: ___________________________________________________

Will your club be a charter member of a national group/society? Yes ____ No ____

If Yes, what is the National Group/Society Name?

If Yes, what is the National Group/Society Web Address?

Briefly describe the purpose of your club and how you will give back to the school community:*

What is your clubs Mission Statement (to be included on the school website)?*
Club Meeting Location: ______________________________________________________

Club Meeting Time/Date: _____________________________________________________

What is the financial plan for collection and distribution of dues?*
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Initial Student Roster (include those students who initiated this request):*
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Will your Club Conduct Fundraisers? Yes _____ No _____
If Yes, Describe the type of fundraisers you will apply for?*
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Will your Club need a student activity fund account with the bookkeeper for financial transactions (dues, fundraising, purchasing of goods, field trips, tournaments)? Yes _____ No _____

Adopt a Spot:*
(Briefly describe your area of school you wish to adopt as a club. You can develop this idea/spot for approval. It is not assigned.)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

*attach additional paper as necessary

Administrative Office Use Only

Department Chair Signature __________________ Department Administrator Signature __________________

☐ Approved  ☐ Not-Approved: ________________________________