

Shippensburg University Student Government Association



Student Group Registration, Conduct & Waiver Contract



All forms must be returned in person to the SUSSI Office, CUB Room 204

Student Group Name \_\_\_\_\_

Organization # \_\_\_\_\_ Academic Year \_\_\_\_\_

(Please circle one) Senate Recognized Campus Registered

Senate Recognized Groups are those that function at Shippensburg University and allow open membership. Campus Registered Groups have more exclusive membership. These student groups include, but are limited to, academic co-curricular groups, academic and social fraternal associations.

<u>Officers</u>	<u>Name</u>	<u>Phone</u>	<u>Email Address</u>	<u>SU ID</u>
President	_____	_____	@ship.edu	_____
Vice President	_____	_____	@ship.edu	_____
Secretary	_____	_____	@ship.edu	_____
Treasurer	_____	_____	@ship.edu	_____
_____	_____	_____	_____	_____

Advisors

1) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Campus Address \_\_\_\_\_  
Email \_\_\_\_\_@ship.edu

2) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Campus Address \_\_\_\_\_  
Email \_\_\_\_\_@ship.edu

Purpose

(This can be your mission statement or a short explanation of what your group is and what your group would like to accomplish.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAS YOUR CONSTITUTION BEEN UPDATED SINCE LAST YEAR? (PLEASE CIRCLE) YES NO  
IF YES, ATTACH A COPY. PLEASE INDICATE CHANGES IN RED

Return completed form to:

SUSSI Office  
CUB Room 204

Office Hours: M-F 8:00 a.m. – 4:00 p.m.  
Office Telephone: 717-477-1730  
Email: [ssinc@ship.edu](mailto:ssinc@ship.edu)





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## ADVISOR CONTRACT for all Student Association Clubs and Organizations

Please read and review the following criteria. The Student Group & Activities Committee (SGAC) of the SU Student Government Association (SGA) is asking that all items be met in order to establish a closer communication link between the group and the advisor.

If you are not planning on being the advisor for the upcoming year, please notify the officers of the appropriate group and the SGA Vice President of Student Groups by calling x1651 or emailing at [sgavpstudentgroups@ship.edu](mailto:sgavpstudentgroups@ship.edu).

**Failure to turn in the group's Student Group Registration, Conduct & Waiver Contract and to notify the SGA of any changes will result in the club or organization's loss of recognition privileges, as outlined in the Swatoney.**

I, (Print Name) \_\_\_\_\_, agree to the following terms as I am a beneficial advisor for \_\_\_\_\_ . I shall:

1. Meet with officers at least twice a semester.
2. Advise student groups in the exercise of responsibility, but not have the authority to control the policy of a student group.
3. Possess knowledge of the rules, regulations, policies and structures of the University as well as the Student Code of Conduct. I should also possess a knowledge and understanding of the goals and objectives of the student group I advise.
5. In the event that I cease my advisor status, the student group membership must take a formal vote to select a new advisor(s). After a vote has been cast, the student group must notify the SGA Vice President of Student Groups in order to make note of the change.
6. A student group may request to have more than one advisor approved by the Student Group & Activities Committee; however, one must be designated as having the responsibility for overseeing all financial matters of the group.

Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_

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As a student member of the organization listed below, I hereby agree to fulfill all of the terms listed below:

1. I will attend and participate in all obligated organization meetings and events.
2. I realize that I am a representative of SUSSI and I have been chosen to represent it and its interests. As such a representative, I understand that any actions I take at any organization event will positively or negatively affect people's opinions about my student group and my University and as a member, I will engage in behaviors which are responsible and mature. Any violations of the Student Code of Conduct (SWATANEY); use of illegal substances, and disruptive, abusive, or inappropriate behavior, may result in dismissal from the university. If I am asked to leave the organization, I understand that I must reimburse SUSSI for any expenses it covers for my participation in the organization. I also agree that I, and not SUSSI, will be held responsible for any extra expenses that may arise out of my dismissal from the organization.

**SHIPPENSBURG UNIVERSITY STUDENT SERVICES INC./SHIPPENSBURG UNIVERSITY  
RELEASE AND INDEMNITY AGREEMENT  
THIS IS A LEGAL DOCUMENT WHICH AFFECTS YOUR RIGHTS  
READ IT CAREFULLY BEFORE SIGNING**

In partial consideration for being permitted to participate in the Shippensburg University student groups program and in consideration for the voluntary nature of such participation, I hereby release, hold harmless and forever discharge Shippensburg University Student Services, Inc. and Shippensburg University, its employees and agents, from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, property damage or personal injury, including death, that may be sustained by me, or otherwise, while participating in such activity. Such participation includes meetings, activities, events and travel to and from all student group activities and functions.

I am fully aware of the risks and hazards association with participation in and the use of facilities and equipment for any student group I elect. I hereby elect voluntarily to participate in said activities and fully acknowledge that I retain full responsibility for any risk or less, property damage, or any personal injury, including death, that may be sustained by me or any less or damage to property owned by me as a result of being engaged in such activities, whether caused by negligence of the University or Shippensburg University Student Services, Inc., its employees and agents, or otherwise. I fully acknowledge that I have procured my own adequate insurance for such loss, damage or injury. I further agree to indemnify and hold harmless the University and Shippensburg University Student Services, Inc., its employees and agents, from any less, liability, damage or cost, including court costs and attorney's fees that may incur due to my participation in said activities whether caused by the negligence of the University or Shippensburg University Student Services, Inc., its employees and agents, or otherwise.

This release and hold harmless agreement is binding on myself, my heirs, assigns and personal representatives.

Completion of this form, a prerequisite for Student Group participation, will constitute the use of one year of collegiate eligibility in any student group.

Prior to signing this document, I have had an adequate opportunity to read and understand it.

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