

ATI CLUBS/ORGANIZATONS MULTIPLE ACTION REPORTING FORM

CLUB NAME: _____ ADVISOR: _____.#

REPORTING OFFICER: _____.# DATE: _____

*Must be an elected office of the club, i.e. President, Secretary, Etc.

EVENT DATE	EVENT/ACTIVITY/CLUB ACTION & PURPOSE (fundraising, social, educational, community service)	BRIEF EXPLANATION	OFFICER INITIAL	ADVISOR INITIAL

IT IS REQUESTED THAT THIS BE FILLED OUT FOR EVERY PLANNED EVENT, ACTIVITY, AND CLUB ACTION.

IT IS RECOMMENED THAT IT HAVE OFFICER & ADVISOR INITIAL AND BE RETURNED TO HEATHER RAKOSIK IN THE SAC, rakosik.1

**For gear orders, please attach logo or email logo to rakosik.1

**All official or trademarked logos MUST be pre-approved by Frances Whited, whited.16