Appendix E, Membership Activity Form

Greek Life
Membership Activity Form

Organization Name: _________________________________ Date: ________________

Submitted by: _________________________________ Position: ________________

This form is due at least 48 hours prior to the event taking place. If you are dealing with new members or potential new members in any way, you need to complete this form.

Type of Activity: ______________________________________________________________
Examples: Intake, Recruitment, Initiation, Interest Session, Informational Meeting, Informal Recruitment

Chairperson for the event: ______________________________________________________

Contact Phone Number: ____________________________ Email address: __________

Date Activity will begin: ________________ Date Activity will end: ________________

Time Activity will begin: ________________ Time Activity will end: ________________

Location of Activity/Event: _____________________________________________________

Who will be in attendance?

Write a brief description of the activities taking place at the event.

Will a chapter advisor be present? YES NO

Is the chapter advisor aware of the activity? YES NO

Have all chapter members, attendees, and other parties involved been made aware of the University’s Anti-Hazing Policy? YES NO

Chapter President’s Signature: ______________________________ Date: ________________

Appendix E, Membership Activity Form – Updated 8/21/14 MDM