GREEK STUDENT ORGANIZATION REGISTRATION ADDENDUM

**Note:** Membership in all organizations, within the limits of their facilities, shall be open to any member of the institutional community, regardless of race, religion, or national origin, who is willing to subscribe to the stated aims and meet the stated obligations of the organization and the institution, by filling in this form, your organization is attesting the same.

Name of Organization: ____________________________________________

Chapter: ______________________________________________________________________

Type of Organization: [ ] Fraternity [ ] Sorority

**Advisors of Organization**

**Off Campus Advisor**

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Office Mailing Address:

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**Regional Director**

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**National Office/Executive Office Contact**

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**Additional information:**

- Need to provide a copy of National Organization Constitution and chapter by-laws (uploaded to your organization’s Campus Connect page)
- Each organization needs to complete requirements for University Recognition.