



Alumni Chapter Registration Form

Proposed Alumni Chapter Name:

Main Purpose of Alumni Chapter:

Activities Planned Within Next 12 Months:

Name of Chair: _____

Address: _____

Phone: _____ **Email:** _____

“We have read all the Saskatchewan Polytechnic Bylaws (attached) and we understand and agreed to these conditions as part of our application to obtain official alumni chapter status. We also understand Saskatchewan Polytechnic Alumni Office reserves the right to terminate chapter status should any of the foregoing conditions be breached by the chapter or its members.”

Chapter Chair

Date

Saskatchewan Polytechnic Alumni Staff

Date

Please complete and return this form to:
Alumni Office
Regina Campus
4500 Wascana Parkway
P0 Box 556
Regina, SK S4P 3A3