CAL STATE FULLERTON

STUDENT LEADERSHIP INSTITUTE CLUB
MEMBERSHIP APPLICATION

Name: _____ SLI Track:_____

Address: _____

Phone: _____ CWID:_____

Email

How did you hear about the SLI Club?_____

Expected Graduation Date: Spring Fall Summer of 20__ Shirt Size XS S M L XL 2XL

Please tell us about any special talents you may have or interest in taking a more active role in the association.

_____

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_____

Thank you for your interest in joining the Student Leadership Institute Club. We are confident you will enjoy and benefit from networking with your peers and enjoying many fun activities.

Cost of membership is PENDING and may include a t-shirt and all the rights and privileges of any member in good standing.

Signature_____ Date_____

Questions can be emailed to SLI Club President: sli@fullerton.edu

Office Use Only:

Membership Fee Paid: $ ___Cash ___Check

Date t-shirt given_____