

## PETITION FOR CHAPTER/CLUB CHARTER

DATE OF APPLICATION	PROPOSED NAME OF CHAPTER OR SPARTAN SOCIAL CLUB
PRIMARY COORDINATOR'S NAME (PLEASE PRINT)	
STREET ADDRESS	
CITY, STATE, ZIP CODE	
COORDINATOR'S TELEPHONE #	
INITIAL MEMBERS NAMES (MIN OF FIVE(5) MEMBERS)	ADDRESSES
<p>The proposed chapter/club agrees to adhere to the MHSAA By-Laws in all respects and further agrees to elect appropriate officers/coordinators within sixty (60) days of the issuance of this requested charter. The applicant chapter/club understands that until such officers/coordinators are duly elected and evidence is provided to the board of directors, that the chapter/club will not be recognized by the board and the chapter/club will have no rights as conveyed by the charter.</p>	
SIGNATURE OF APPLICANT REPRESENTATIVE _____	DATE _____