

# 2009 SCASC Membership Application

(Membership year begins January 1, 2009, and will run until December 31.)

The Student Council of \_\_\_\_\_  
(name of school)

Mailing address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

***Membership includes participation in the awards program, voting privileges at the annual convention, leadership training, website lesson access, and any publications, resources, and materials that might be issued.***

President's name \_\_\_\_\_

Principal's name \_\_\_\_\_

Advisor's name \_\_\_\_\_

School phone \_\_\_\_\_ Student Body Enrollment \_\_\_\_\_ Grades \_\_\_\_\_

E-mail \_\_\_\_\_ Fax number \_\_\_\_\_

**ANNUAL MEMBERSHIP FEE : \$50            New \_\_\_\_\_            Renewal \_\_\_\_\_**

**Make checks payable to SCASC.**

**Mail check and form to: Mrs. Lola W. Richbourg  
SCASC Executive Director  
2800 Bachman Road  
Gaston, SC 29053**

To the Principal and Student Council Advisor:

We invite your school to become a member of the South Carolina Association of Student Councils. To begin enjoying the benefits of the programs offered by our association, please take a moment to complete the form above and mail it with your check today.