



**Central Bucks High School West  
Club Activity Request Form**

Name of proposed Club/Activity: \_\_\_\_\_

*(Please make sure the school's present clubs do not already cover your interest area.)*

Brief description of the goals/objectives of the Club/Activity: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Frequency of meetings: \_\_\_\_\_

Meeting times: \_\_\_\_\_ Proposed Meeting place: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Sponsor's Signature: \_\_\_\_\_

*(Must be a faculty or staff member who has agreed to sponsor and coordinate the activity.)*

Membership eligibility: \_\_\_\_\_

Long term goals of the Club/Activity: \_\_\_\_\_

Short term goals of the Club/Activity: \_\_\_\_\_

Plans to raise funds (if applicable): \_\_\_\_\_

How will the Club/Activity benefit the students and/or the community of CB West? \_\_\_\_\_

\_\_\_\_\_

Name(s) of student starting Club/Activity: \_\_\_\_\_

List of interested students (10 minimum):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Please submit form to Mrs. Zaleski, House Principal in the Main Office.***

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_