ANDREWS UNIVERSITY – CLUBS REQUEST TO CHARGE FEES

Please complete and return to Elynda Bedney at Student Financial Services CLUB INFORMATION						
CERTIFICATION: I certify the	hat the information on this form is complete and accurate					
Advisor's Name:	Treasurer's Name:					
Advisor's Signature:	Treasurer's Signature:					
Date:						
TOTAL number of students to b	pe charged:					
TOTAL amount to be credited to	o club account:					
COMMENTS						

CLUB:

	Student's	ID	Amount to	Student's
	Name	Number	Charge	Signature
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	Student's Name	ID Number	Amount to Charge	Student's Signature
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