

**Attachment 6C - Texas Gulf Coast Council of Diving Clubs  
2017 Student Organization INFORMATION SHEET**

Student Organization's NAME -- \_\_\_\_\_

School's Name - \_\_\_\_\_

Approximate Number of Students = \_\_\_\_\_ General Age Group \_\_ to \_\_.

Organization's MAILING ADDRESS -

CITY - \_\_\_\_\_ STATE - \_\_\_\_\_ ZIP - \_\_\_\_\_

WEB Site - \_\_\_\_\_ Email: \_\_\_\_\_

Organizations Faculty Advisor's NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

E-Mail address - \_\_\_\_\_

=====  
TGCC's information contact for your organization - Name -  
\_\_\_\_\_

E-mail - \_\_\_\_\_ PHONE # - \_\_\_\_\_

=====  
**For Full Member Club's the following is required**

**CLUB'S TGCC REP W/ADDRESS** \_\_\_\_\_

\_\_\_\_\_ (H) PHONE \_\_\_\_\_ (W) PHONE \_\_\_\_\_

E-Mail \_\_\_\_\_

**CLUB'S 1ST ALTERNATE REP**

Name & Address \_\_\_\_\_

\_\_\_\_\_ (H) PHONE \_\_\_\_\_ (W) PHONE \_\_\_\_\_

E-Mail \_\_\_\_\_

=====  
**Faculty Advisor's SIGNATURE** \_\_\_\_\_

Date \_\_\_\_\_