

**Bull Market
Student Organization
Contact and Information Card**

Please Print Clearly

Group Name: _____	Valid Alias: _____
President: _____	President's Email: _____
Group's Email _____	Group Phone: _____
Contact Person: _____	Contact's Phone: _____
Contact's Email: _____	

In case of concerns, should our office contact the contact person, the organization head, or both? _____

Purpose for attending Bull Market: _____

Received by: _____ (Bull Mrkt. Employee only)	<input type="checkbox"/> Group Active <input type="checkbox"/> Verified by Student Activities <input type="checkbox"/> Copy of Rules and Regulations on file
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This form will be your permanent record with the Bull Market. If there are any changes to the information provided here, you are responsible for notifying the Market Staff. By signing below, I state that the information listed above is true and take responsibility for notifying the Market of any changes that may occur. Further more, I have read, understand, and signed the Market Rules and Regulations.

President/Head: _____	Date: _____
Printed Name: _____	