



Associated Students, Inc.

Financial Services USU 317
5280 N. Jackson Ave. M/S U-32
Fresno, CA 93740
Phone: 559.278.2656

New: request your statement online!

The Club Activity Report Request Form is now available on the ASI website under the Club Accounts section: asi.csufresno.edu

ASI CLUB ACCOUNT AUTHORIZATION FORM

FORM MUST BE TYPED AND BEAR ORIGINAL SIGNATURES IN BLUE INK

Official Club Name: _____

Club Account #: _____

The undersigned warrants and represents to associated Students, California State University, Fresno (“ASI”) that he/she is an authorized representative of the _____ [name of club] (hereinafter “Club”), and that Club desires and is authorized, in accordance with all required legal and organizational approvals, to open a Club Account with ASI, and that such Club Account shall be subject at all times to all ASI policies and procedures for Club Accounts now existing and which hereafter may be enacted by ASI (“Policies and Procedures”). The undersigned warrants and represents on behalf of Club that Club will adhere to all such Policies and Procedures.

On behalf of Club, Club agrees that at any time if at least two (2) years have transpired without either: (i) Club having deposited funds into or withdrawn funds from the above-referenced Club Account, or (ii) ASI having received any oral or written contact from an authorized representative of Club, then ASI shall remit the entire balance of the above-referenced Club Account to Club by making a check payable to Club and delivering the same to the undersigned at the address shown below. Upon receiving such check, the undersigned, or other authorized representative of the Club, shall promptly cash the check and remit such funds to the Club.

Must be completed:

Advisor Name (Print) _____

Advisor Signature _____

Date _____

Mailing Address:

