

Homecoming 2009
Organization Entry Form

Organization/Group: _____
(Full Name, No Greek Letters or Abbreviations)

Organization's Contact Person: _____

TTU Box No: _____ Phone: _____ Email: _____

Organization's Advisor: _____

TTU Box No: _____ Phone: _____ Email: _____

What type of organization do you represent?

- _____ Fraternity/Sorority
- _____ Registered Student Organization
- _____ Residence Hall Team
- _____ Athletic Team
- _____ Other Please specify: _____

*A complete **list of your organization's members** must be updated or turned in by **Wednesday, October 21st in RUC room 119**. Please review page 4 of the Homecoming packet for more information.

*If you are participating with another organization, please give the full name of the organization:

Please check the competitions your group is participating in:

- | | |
|-------------------------|----------------------|
| _____ Banner | _____ Fear Factor |
| _____ Haunted House | _____ Ghoulish Games |
| _____ Skit Night | _____ Spirit Day |
| _____ Canned Food Drive | _____ Pep Rally |
| _____ Parade | |

Date Submitted: _____