SIGNATURE DOCUMENT
University of Nevada, Reno Relationship Agreement for the Recognition of Social Fraternities and Sororities
CALENDAR YEAR 2019

We, the undersigned, have read, understand, and shall comply with the University of Nevada, Reno Relationship Agreement for the Recognition of Social Fraternities and Sororities and shall share all of the undersigned policies with our general chapter membership regarding the terms and conditions of the official University of Nevada, Reno Relationship Agreement for the Recognition of Social Fraternities and Sororities for the 2019 calendar year.

Fraternal Organization: ___________________________ Chapter Designation: __________

Chapter President (print): __________________________________________________________

President’s Signature: ___________________________ Date: _____________________________

Chapter Vice President (print): _____________________________________________________

Vice President’s Signature: ___________________________ Date: __________________________

Chapter New Member Educator (print): _______________________________________________

New Member Educator’s Signature: ___________________________ Date: __________________

Chapter Risk Manager (print): _____________________________________________________

Risk Manager’s Signature: ___________________________ Date: _________________________

Chapter Advisor (print): __________________________________________________________

Advisor’s Signature: ___________________________ Date: _____________________________

University of Nevada, Reno Representatives:

Dr. Romando Nash
Associate Vice President for Student Life, Student Services

_________________________________________ Date: _____________________________