



Lake Tahoe Community College

Student Activities

2022/23 Club Handbook



Office of Student Life
Lake Tahoe Community College
One College Drive
South Lake Tahoe, CA 96150
530-541-4660 x 206



Forms



LAKE TAHOE COMMUNITY COLLEGE

ADVISOR CHANGE FORM

Submit completed form to the Student Life Coordinator

Club Name: _____

Current Club Advisor: _____

New Advisor Name: _____

Full-time classified

☐

Part-time hourly

☐

Full-time faculty

☐

Adjunct faculty

☐

Contact Information

Email address: _____

Phone Number: _____

Office Number: _____

Required Signatures

Please make sure to turn this form into the Student Life Coordinator

New Advisor

Signature

Date

Student Life Coordinator

Signature

Date

Submit finished form to the Student Life Coordinator
Office A106 - astephens@ltcc.edu



NEW STUDENT CLUB APPLICATION FORM

PLEASE PRINT OR TYPE

DATE: _____

CLUB NAME: _____

ADVISOR: _____

OFFICERS	NAME	SID#	EMAIL ADDRESS
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President:	_____		
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Vice President:	_____		
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Secretary:	_____		
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Treasurer:	_____		
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MEMBERS	NAME	SID#	EMAIL ADDRESS
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OFFICE USE ONLY

Constitution Submitted: _____

Fiscal Services Orientation: _____

Student Life Coordinator: _____

Club Approval: _____

CONSTITUTION
of the _____ Club
of Lake Tahoe Community
College

Article I

Name and Membership

Section 1

The name of this organization shall be the _____ Club of Lake Tahoe Community College.

Section 2

All students currently registered at Lake Tahoe Community College shall be entitled to the privileges at outlined in this constitution.

Article II

Purpose of Organization & Mission Statement

The purpose of the _____ Club is to _____

Article III

Officers

Section 1

The elected officers of this organization shall be President, Vice President, Secretary, and Treasurer.

Membership in the _____ Club is open to all students of Lake Tahoe Community College.

Section 2

Term of office shall be one year. Officers may be re-elected and serve consecutive years. Should an officer become unable to perform the duties of the position and choose not to continue holding this office, the officer will be replaced by a majority vote of the first meeting per quarter with a minimum of 50% of the membership present at the beginning of the next quarter. The four officers plus the LTCC Faculty/Staff advisor shall comprise the Club's Executive Committee.

Section 3

It shall be the duty of the President to set the agenda, conduct meetings, keep records, and act as a spokesperson for the club.

Section 4

It shall be the duty of the Vice-President to assist the President as needed and function as the President in the President's absence,

Section 5

It shall be the duty of the Treasurer to keep track of funds raised through fundraising events or donations.

Section 6

It shall be the duty of the secretary to record the minutes of each official meeting and present them to the club for approval at the next meeting.

Article IV

Membership

Section 1

Meetings shall be held at least six times per quarter and shall be called by either the President or Vice- President at least one week prior to the meeting date. Membership is open to all students at Lake Tahoe Community College.

Section 2

A student may become a member of the _____ Club by expressing an interest in the club and attending two consecutive meetings.

Article V

Meetings

Meetings shall be held as needed. All members will be notified of scheduled meetings one week in advance.

Article VI

Parliamentary Authority

The State Parliamentary Authority through the adoption of which a society established its rules of order, i.e., "The rules contained in the current edition of Robert's Rules of Order shall govern the _____ Club of Lake Tahoe Community College in all cases to which they are applicable and in which they are not inconsistent with the constitution/Bylaws of the _____ Club of Lake Tahoe Community College."

Article VII

Quorum

Club meetings must include four club members and two officers in order to conduct business legally; including either the President or the Vice-President.

Article VIII

Amendments

Section 1

The proposed amendment must be in the hands of the club officers no later than one week before the scheduled meeting of the _____ Club of Lake Tahoe Community College at which it is presented.

Section 2

Following the approval of the amendment by the officers, this constitution may be amended by a 51% vote of the membership at the first meeting of the organization at which a quorum is present.

Article IX

Enacting Clause

This constitution shall become effective upon approval of the following individuals:

FOUNDING STUDENT: _____ DATE: _____

CLUB ADVISOR: _____ DATE: _____

STUDENT LIFE COORDINATOR: _____ DATE: _____



LAKE TAHOE COMMUNITY COLLEGE

CLUB RENEWAL

Name of Club _____

Place, Day and Time of Meeting _____

Quarter and Year _____

Advisor _____

*Advisor Contact Email _____

****This E-mail Address will be used to disseminate information and updates relating to club Operations and to notify clubs of upcoming Lake Tahoe Community College events.**

*****Please fill out the Student Club Leadership Form after your clubs have voted for their officers.**

First Name	Last Name	Student ID	Preferred Contact Info:

Club Renewal Form Due Dates:

FALL: OCTOBER 14

WINTER: JANUARY 27

SPRING: APRIL 28



LAKE TAHOE COMMUNITY COLLEGE

STUDENT CLUB LEADERSHIP FORM

Submit completed form to the Student Life Coordinator

Club Name: _____

Club Advisor: _____

Club Position	First and Last Name	Student ID	Preferred Contact Info:
President			
Vice President			
Secretary			
Treasurer			

Required Signatures

Club Advisors turn this form into Student Life Coordinator

Club Advisor

Signature

Date

Student Life Coordinator

Signature

Date

Submit finished form to the Student Life Coordinator
Office A106 - astephens@ltcc.edu

Student Club Leadership Form:

DUE AFTER THE SECOND MEETING OF THE CLUB

LAKE TAHOE COMMUNITY COLLEGE

CLUB ACTIVITY APPROVAL FORM

1. A 5 business day notice is required for bookings that do not require tech or maintenance assistance for set-up
2. A 10 business day notice is required for bookings that require tech and/or maintenance assistance for set-up.
3. A 30 day notice is required for large events where tech and/or maintenance personnel are required for extensive set-up.

Club Sponsoring Activity: _____

Type of Activity: _____

**If activity involves travel, have all appropriate forms been completed?*

Waiver Form? ☐ Yes ☐ No

Emergency Notification Form ☐ Yes ☐ No

Activity Date: _____ Activity Time: _____

Contact person: _____ Phone/Cell/Ext: _____

Advisor or staff person who will supervise activity: _____

Club Officer Signature: _____ Date: _____

Club Advisor Signature: _____ Date: _____

Please circulate through the following offices applicable to the activity/meeting:

Foundation Office

Signature Required for ANY Off-Campus Donations/Requests (e.g. ~ Raffle Prizes)

Foundation Director: _____ Date: _____

Fiscal Services Office

Signature Required for ANY Event Sales/Donations

Fiscal Services Representative: _____ Date: _____

(* Does Activity Require a Cash Box? ☐ Yes ☐ No) (*\$25 Change Needed? ☐ Yes ☐ No)

Student Services Office

ALL Events Require VP's Signature

VP of Student Services _____ Date: _____

Student Life Office

ALL Events Require Coordinator's Signature

Student Life Coordinator: _____ Date: _____

Scheduling Office

ALL Events Require One Week Notice for Approval & Attached Internal Facilities

Scheduling Office: _____ Date: _____

Original/completed forms are to be returned to the Office of Student Life, Room A106

LAKE TAHOE COMMUNITY COLLEGE DISTRICT

REQUIRED ACTIVITIES/FIELD TRIP PARTICIPATION, MEDICAL AUTHORIZATION and ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK Adult/Minor Participation Waiver

I, _____, wish to participate in the Lake Tahoe Community College's _____ on _____.
(event) (date)

Class: _____ Instructor: _____

Destination: _____

Departure Date and Time: _____

Return Date and Time: _____

I understand that pursuant to the California Code of Regulations, Subchapter 5, Section 55450, participation in this activity is required and part of the regular educational program/coursework. I understand and acknowledge that I am deemed by law to have waived any claims against Lake Tahoe Community College District, its' officers, agents, volunteers, and/or employees for injury, accident, illness, or death occurring during or by reason of the field trip/activity. I understand that participation in this activity may result in illness or injury including but not limited to:

- | | | |
|------------------------------|---------------------|--------------------|
| 1. Sprains/strains | 4. Fractured bones | 7. Unconsciousness |
| 2. Head and/or back injuries | 5. Paralysis | 8. Death |
| 3. Communicable diseases | 6. Loss of eyesight | |

I understand and acknowledge that in order to participate in this activity I agree to assume liability and responsibility for any and all potential risks which may be associated with participation in such activity. I affirm that I am physically able to participate in this activity.

(____) Participant Initials

I have no known medical condition(s) which may pose a risk to the health and safety of me or others by participating in the activity(ies). I agree to advise the District in writing of any medical, physical or health condition which may be affected or in any way jeopardized my participation. In the event of any illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care from a licensed physician and/or surgeon as deemed necessary for my safety and welfare. It is understood and agreed that the resulting expenses will be the responsibility of the participant.

(____) Participant Initials

I understand, acknowledge, and agree that the District, its employees, officers, agents, and volunteers shall not be liable for any injury or illness suffered by me which is incident to and/or associated with preparing for, participating in, or traveling to or from this activity.

(____) Participant Initials

I acknowledge that I have carefully read this REQUIRED ACTIVITIES/FIELD TRIP PARTICIPATION, MEDICAL AUTHORIZATION and ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK form and that I understand and agree to its terms.

Participant Signature

Date

If Minor Participant - Parent Signature

Date

Emergency Contact Name & Phone Numbers: _____

A signed copy of the REQUIRED ACTIVITIES/FIELD TRIP PARTICIPATION, MEDICAL AUTHORIZATION and ACKNOWLEDGMENT, AND ASSUMPTION OF POTENTIAL RISK form must be on file with the District before participation in the activity described above.

Please provide the following PARTICIPANT information:

Printed Name: _____ Date: _____

Signature: _____ Phone: _____

Address: _____

Medical Insurance Carrier

Policy No.

Address

All students participating in a required activity/field trip must complete this form and submit it to the Instruction Office prior to the trip.

To assist the instructor and/or Emergency Personnel please list any pertinent medical information.

Allergies:
(nuts, bee stings, latex, etc.)

Medical History:
(diabetes, epilepsy, etc.)

Current Medications:
(inhaler, Zoloft, nitro, etc.)

*If field trip participant has any special medical concerns, please attach a description to this page.
Thank you.*

LAKE TAHOE COMMUNITY COLLEGE DISTRICT
INTERNAL APPLICATION AND CONTRACT FOR USE OF FACILITIES

- A 5 business day notice is required for bookings that do not require tech or maintenance assistance for set-up (EMS Web APP requests allowed for these requests only).
- A 10 business day notice is required for bookings that require tech and/or maintenance assistance for set-up.
- A 30-day notice is required for large events where tech and/or maintenance personnel are required for extensive set-up.

Requests received less than the required approval times may be denied. This is only a request until final confirmation is sent. **CANCELATIONS:** Notice must be given at least three business days prior to the scheduled event:

LTCC Requestor/Dept. _____ EXT. _____ Application Date: _____

This section is to be filled out only if requesting to sponsor/host an external group:

Group Represented (being hosted): _____ Type of Group* : _____

*Group Types: (NON-PROFIT, PROFIT, LOCAL YOUTH, PUBLIC AGENCY, OTHER). Proof of 501 (C)(3) may be required. If payment is determined to be required from an outside agency, an external application will need to be submitted in lieu of this internal form.

Reason/explanation:

Event/Purpose of: _____

Use:*Date(s) of Use:

Event Time: Start: _____ AM/PM to _____ AM/PM. *Please note above if times are different for multiple day requests.

Set-up/take-down time needed: _____ (total hrs. before) _____ (total hrs. after)

Number of participants expected: _____ Will participants be charged? Yes / No

If Yes, Purpose of charges? _____

Other Requests/Notes:

Requestor's Signature

Date:

Administrative Approval/Signature (only for requests to host external groups)

Date

This contract is subject to all LTCC policies and all applicable laws of California.

LAKE TAHOE COMMUNITY COLLEGE DISTRICT
VEHICLE RESERVATION FORM

SUBMIT THIS FORM TO MAINTENANCE & OPERATIONS DEPT.

Driver Name: _____ Date of Request: _____

Departure: _____ A.M. P.M.
Day Date Time

Return: _____ A.M. P.M.
Day Date Time

Destination: _____
Address

Conference Date(s) & Time: _____

Conference/Travel Form # _____ Est. Round Trip Mileage _____

Budget Code: _____

Passenger Names: _____

Who else will be driving this vehicle? _____

I, _____ certify that I have a valid driver's license and that I understand and will abide by all District and State rules and regulations regarding the operation of the College vehicle.

Driver's signature: _____

Home Phone: _____

I have alternate transportation available if the college vehicle is not available. **YES** **NO**

Maintenance Department: _____

Vehicle is available as requested: **YES** **NO** Driver Notified on: _____

Vehicle key, credit card and travel log pick-up scheduled for: _____
Date

_____ A.M. P.M.
Day Date Time

Comments: _____

M&O: Keys picked up by: _____
Name Day Date



LAKE TAHOE COMMUNITY COLLEGE DISTRICT STUDENT CLUBS REQUEST FOR REIMBURSEMENT



Club Name: _____

Date: _____

Check all that apply: (Complete one form per vendor and/or activity)

- ☐ Vendor Check Request (Attach invoice and W9 if applicable)
☐ Student or Advisor Reimbursement (Attach receipt(s) of good(s) received)
☐ Donation/transfer to other Clubs
☐ Other: _____

Date Stamp

AUTHORIZATION

- All purchases are subject to verification of available funds and administrative approval.
- Please attach a copy of meeting minutes approving this use of funds.
- Reimbursements to an advisor require the approval of the V.P. of Student Services

Meeting date: _____ ☐ Minutes attached

Club approval: _____ Date: _____

Advisor approval: _____ Date: _____

V.P. of Student Services: _____ Date: _____
Approval (For Club Advisor reimbursement(s) only)

VENDOR/ PURCHASE INFORMATION

List all items to be purchased separately. Include price per unit, sales tax, shipping and total (or "not to exceed" amount).

QTY	ITEM	DESCRIPTION	UNIT PRICE	TOTAL
VENDOR NAME			TAX	
MAILING ADDRESS				
CITY		ZIP CODE	SHIPPING	
PHONE NO.			TOTAL	

FISCAL SERVICES USE ONLY

- ☐ Funds verified Paid, check number _____ Date _____
☐ Back-up complete Account/Class _____