



OFFICE OF STUDENT INVOLVEMENT  
STUDENT ORGANIZATIONS HANDBOOK

**PUBLICITY REGISTRATION FORM**

This form must be filled out by all student organizations that distribute publicity materials on-campus or off-campus. It is to be filled out for each publicized activity held by your student organization. The Publicity Registration Form and **two final-version publicity samples** must be submitted to the Office of Student Involvement at least 1 week prior to printing of publicity.

**Student Organization:**

---

**SL or CA Name:**

---

**SL or CA Email:**

---

**SL or CA Phone:**

---

**Publicity Start Date:**

---

**Publicity End Date:**

---

**SO Publicity Removal:**

---

**Type of Distribution:**

- Chalk (Ground-based PR)     Distributed/Mailed     Posted     Other

**Target Audience:**

---

**Publicity Description:**

Electronic Media Publicity does not require the Publicity Registration Form, but standard guidelines do apply. For all Electronic Media Publicity (email, websites), contact the Office of Student Involvement at [getinvolved@drury.edu](mailto:getinvolved@drury.edu) to begin process to publicize events.

**PUBLICITY INFORMATION:**

I have reviewed the student organization publicity guidelines and will incorporate the guidelines into our publicity. I agree that our publicity will comply with all policies, guidelines, and laws. I understand that incomplete/false information could limit future publicity opportunities and could result in disciplinary action. Regardless of the original intent, student organizations must understand that the publicity may be removed to ensure the continued well-being of Drury Students.

I certify that the information listed above is true. My signature on this form verifies that I agree to the previous statements and will comply with any action deemed necessary by the host student organization and Drury University personnel.

Student Organization Authorized Signature      Date of Signature      Printed Name of Authorized Student Organization Representative

**OFFICE OF STUDENT INVOLVEMENT USE ONLY:**

<input type="checkbox"/> Student Organization Name Clearly Listed? <input type="checkbox"/> Fees Involved Clearly Listed? <input type="checkbox"/> Date of Event(s) Clearly Listed? <input type="checkbox"/> Time of Event(s) Clearly Listed? <input type="checkbox"/> Event Description Clearly Listed?	Anticipated Copies: Posting/Chalking Location: Proofread: Drury Logo Used? UC Approval:
--	--

Student Involvement Approval Signature      Date of Signature      Printed Name of Student Involvement Approval Representative

**Date Received:**

---

**Follow-up Meeting:**

---