

New Member Contract

LAST NAME: _____ First Name: _____ MI: _____ CLID # _____

Organization: _____ Classification: _____ High School: _____

The undersigned new member understands that I have the following responsibilities as a member of a Greek organization at the University of Louisiana at Lafayette.

The University is opposed to any situation created intentionally or unintentionally to produce mental or physical discomfort, embarrassment, harassment, or ridicule. Freedom from the humiliation and danger of hazing is guaranteed to every student. Any violation of this statement must be reported immediately to the Office of the Dean of Students. I understand that failure to report any incidents of hazing could jeopardize my relationship with the Greek system and my status as a student.

As a fraternity/sorority member I pledge that I will work to eliminate all forms of hazing practices as well as abide by state and federal laws. I will also uphold all rules and regulations of the University as outlined in the Code of Student Conduct in section twenty-one. I grant permission to release any current or future discipline records to my chapter officers, advisor, and national organization.

I understand that as a member of a Greek organization I have the obligation to pay membership dues and fees according to the policies of my fraternity/sorority. If I choose not to pay my membership dues, the chapter and the University has the right to put a hold on my student account which will result in failure to register for future classes, obtain a transcript, and graduate.

I understand that it is my responsibility to maintain good academic standing with the University while a member of a UL student organization. Organization members must be a matriculated UL student and maintain at least a 2.0 grade point average (or GPA required by National/Regional/State Organization) to remain active in any UL student organization. I grant permission to release my grades to the Dean of Students Office, my chapter officers, advisor, and national organization.

Signature: _____ Date: _____

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