

SCC311, 55 Gould Street, Toronto, Ontario M5B 1E9

Letter of Endorsement for Affiliate Group

Date:					
Group's name:					
Dean/Chair or designate or Organization Supervisor:	Name	Faculty/Organization			
	Email	Phone Ext.			
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To the Ryerson Students' Union Executive Committee,					
I wish to endorse the activities of as a group of Ryerson students who share an interest interest in academic related projects, academic programme-based issues, political views, or creating a Ryerson chapter of a third-party non-profit organisation.					
This endorsement signifies my approval of the group's project and/or activities. It is my understanding that this group will be financially self-sustaining. I acknowledge that I have seen the Responsibility and Liability Form and that it was duly signed and dated by the students heading the group. The Responsibility and Liability Form dictates that any liabilities incurred by the group are solely the responsibility of the individual students who comprise the group.					
This endorsement will be valid for a term of one year, commencing as of the date appearing above. I am free to terminate this endorsement at any time provided I notify the Ryerson Students' Union of my decision to do so. The Ryerson Students' Union will withdraw the group's Affiliate status upon receipt of this written notification.					
Sincerely,					



Date:

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Letter of Responsibility and Liability - Affiliate Group

Faculty:

Group's name:			
To the Ryerson Students'	Union (RSU),		
We, the			(group name)
agree that we are equally and	fully responsible to pay any liab	lities incurred by the	
This responsibility for liability is SEPTEMBER 30.	s valid commencing as of the si	gning date appearing	above and ending
•	terminate this agreement at an ons for it. However, we agree to be with the above terms.	•	•
Name:	Student #:		Signature:
Address:	Suite #:	City:	Postal Code:
Email:	Tel	ephone / cell:	
Name:	Student #:		Signature:
Address:	Suite #:	City:	Postal Code:
Email:	Tel	ephone / cell:	
Name:	Student #:		Signature:
Address:	Suite #:	City:	Postal Code:
Email:		ephone / cell:	
			Signature:
Address:	Suite #:	City:	Postal Code:
Email:	Tel	ephone / cell:	
Name:	Student #:		Signature:
Address:	Suite #:	City:	Postal Code:
Email:	Tel	ephone / cell:	
Name:	Student #:		Signature:
Address:	Suite #:	City:	Postal Code:
Email:	Tel	ephone / cell:	
			(May add more names on back of this page