Recognized Student Organization (RSO) Locker Contract

RSO’s Name: ___________________________________________ Locker no. ______

Your Name: __________________________________________ Position: ______________________

Telephone/Cell Phone: ________________________________ Email: __________________________________

As an RSO representative, I agree to the following with regards to the usage of a locker:

1. I understand we must be a Recognized Student Organization and registered on GetConnected.
2. I agree to use the locker assigned to us in a responsible manner.
3. I understand that it is a violation of this locker contract to store perishable food or drinks, illegal drugs or substances, drug paraphernalia, weapons, ignitable substances, any other substances or items that will create a hazard to others and/or be attractive to rodents or insects. Any other prohibited items as stated in the Code of Student Conduct are also a violation.
4. I understand that lockers will be assigned in numerical order on a first come first served basis.
5. I understand that our assigned locker may not be shared with other RSOs.
6. I understand that the lockers are university property. As such, damage to the locker may result in a fine as designated by Student Involvement and/or jeopardize our ability to reapply for a locker next year.
7. Only Executive Board Members of the RSO may have access to the locker.
8. I understand that Student Involvement reserves the right to search through lockers at any given time.
9. I understand that Student Involvement can request the removal of any items they deem inappropriate.
10. I understand that once the locker is assigned, we cannot ask to be assigned to a different locker.
11. I understand that we have to reclaim our items and empty the locker by Friday at 5:00 pm on the last week of finals of Spring Semester.
12. I understand that if we fail to remove items from the locker within the deadline, Student Involvement reserves the right to remove and discard all items.

_____________________________________________________ ______________________
Signature Date

*For Student Involvement Use ONLY*

Date Received: ________________________________ Contract End Date: ________________________________

_____________________________________________________ ______________________
Signature of Program Coordinator for Student Organizations Date

Last Updated: 07/21/2015