

[NAME OF STUDENT CLUB /ORGANIZATION]
School year [__]

No.	NAME, Sex, Age Course, year and section	Specimen Signature Contact Number
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		

15

16

17

18

19

20

21

22

23

24

25

26

27

28

	TECHNOLOGICAL UNIVERSITY OF THE PHILIPPINES CAVITE CAMPUS Carlos Q. Trinidad Avenue, Salawag, Dasmariñas City, Cavite, Philippines Telefax: (046) 416-4920 Email: cavite@tup.edu.ph Website: www.tup.edu.ph	
OSA	LIST OF MEMBERS	Page 3/3

29

30

(Preferably in alphabetical order, officers included. Use additional sheets if necessary)