**DE LA SALLE SANTIAGO ZOBEL SCHOOL**

(FORM 3)

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***CLUB MEMBERSHIP ROSTER***

**Note: This form should be accomplished after the third meeting of the First Term.**

**ORGANIZATION/ CLUBNAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VENUE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**SECRETARY’S NAME & SIGNATURE MODERATOR’S NAME & SIGNATURE**