Return completed form to: Student Activities Office 2 Student Services Building

APPLICATION FOR REGISTERED ORGANIZATION STATUS

University of Illinois at Urbana-Champaign

FOR ACADEMIC YEAR 88/89 (Annual renewal due on or before September 15)

Date submitted_	9-14-88
Re-regis	_ New
New officers	

ALL INFORMATION	MUST	BE	TYPED	:
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7	L INFORMATION MOST BE TIFED.
1.	Official Name of Organization (If acronym or abbreviations, also give full name) Iranian Cultural Association
2.	Official Mailing Address (Required) Box 2232, Champaign, Il, 61820 Phone 333-5065 (Where all correspondence and account receivable bills are sent)
3.	University Organization Fund Account Number No Account Request Account (Any funds received on University property must be deposited into this account.)
4.	Purpose of Organization To promote cultural & social activities
	To present various aspects of Iranian culture
5.	Check ONE as to type of organization: Academic Athletic/Recreation Service
	Rights/Freedom Government Creative/Performing ArtsXX_ Cultural/Ethnic
	Political Religious Social Name if other
6.	Membership in a registered organization is restricted to registered students, faculty, staff, and their spouses. Organizations combining U. of I. students/staff with community people may register as Campus Community groups with the Space Utilization Office, 243 Davenport House.
W	e, the undersigned:
	a. assert that we are the authorized and responsible Registered Agents of this organization.b. certify that this organization meets all requirements stated above and on the reverse side of this application.c. agree to the following "Pledge of Nondiscrimination."
or se th	It is the policy of the University of Illinois at Urbana-Champaign that "registered organizations" shall be in full compliance ith all federal and state nondiscrimination and equal opportunity laws, orders, and regulations. In addition, registered ganizations shall not practice discrimination against a member or prospective member on the basis of race, color, religion, ex, sexual orientation, national origin, ancestry, political affiliation, age, marital status, handicap, unfavorable discharge from the mailtangle military, or status as a disabled veteran or veteran of the Vietnam era, except as specifically exempted by law. By signing its document the named organization pledges compliance with this policy.
E	NAME SIGNATURE ADDRESS CITY PHONE
6	Farshid Adibi-rizi Jarshid Albh-Ligh 103 E. Daniel #10 Chm. 367-6575
V.	P. Naghmeh Mirghafori W. Mirghafori 1006 S. First #4 Chm. 337-6622
	ecy. Kayvan Nasser-ghodsi Kayvan Nassenhodu 806 W.Oregon Urb. 367-7479
TI	reas Bijan Houshmand B. Hall 705 E.Colorado #210 Urb. 344-0002
A	dvisor Mahta Moghaddam Multh Wyl 705 E.Colorado #210 Urb. 344-0002
0	PRGANIZATION'S REGISTERED STATUS CONFIRMED BY: Director of Registered Organizations Date ////89