

Cornerstone Club Contact Form



School: \_\_\_\_\_ Year: \_\_\_\_\_

School Address: \_\_\_\_\_

Club Advisor's Name: \_\_\_\_\_ Position: \_\_\_\_\_

Advisor's Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Meeting Time/Location: \_\_\_\_\_

Club Officers (if any):

Position: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Name : \_\_\_\_\_

Approximate number of Cornerstone Club members: \_\_\_\_\_

**Student Action Plans/Project/Ideas:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*\*\*\* Please return the Club Contact Form to Project Cornerstone\*\*\**

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Project Cornerstone  
1922 The Alameda, 3<sup>rd</sup> floor  
San Jose, CA 95126  
Attn: Alexandra Ponce

Fax: (408) 298-0143 Attn: Alexandra Ponce  
Project Cornerstone