

CHAPTER: \_\_\_\_\_

CHAPTER ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

CHAPTER FAX: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

CHAPTER EMAIL: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_

*This form must be emailed or mailed to state office every year after election and after any officer change during the year.*

**CHAPTER OFFICERS**

**PRESIDENT:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**VP:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**SECRETARY:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**TREASURER:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**SGT-AT-ARMS** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**MEMBERSHIP:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**PR/COMM:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**LEGISLATIVE:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**NEWSLETTER:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**PRODUCTS:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**SAFETY EDUCATION:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**WEBMASTER:** \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL: \_\_\_\_\_

**CHAPTER REP:** \_\_\_\_\_ PHONE: \_\_\_\_\_

**CHAPTER REP:** \_\_\_\_\_ PHONE: \_\_\_\_\_

Please use other side for more officers if necessary.

Chapter meetings are held what day and time? \_\_\_\_\_

Address of Meeting: \_\_\_\_\_

Directions: \_\_\_\_\_

Does your chapter have it's own by-laws? \_\_\_\_\_

What Bank do you use for Checking \_\_\_\_\_ Account#

What Bank do you use for Savings/CD \_\_\_\_\_ Account#

Other accounts (CD/banks/etc.) \_\_\_\_\_