

ROSTER OF OFFICERS FOR CAMPUS CHAPTER

Name of Group

Campus

Mailing Address

City

State

Zip

Group Website

PRESIDENT			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

RECORDER			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

VICE PRESIDENT			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

OTHER OFFICER			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

TREASURER			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

OTHER OFFICER			
Home Address			
City	State	Zip	
Phone ()	Cell ()		
Email			
Signature			

CHAPTER MEETINGS:

WEEK OF MONTH: _____

TIME: _____

DAY OF WEEK: _____

PLACE: _____