

CLUB NAME _____

CLUB MEETING INFORMATION: **ONLY NEED TO FILL THIS OUT IF SOMETHING HAS CHANGED. THERE ARE THREE PAGES TO FILL OUT BELOW. NO CHANGE IN CLUB INFORMATION, PLEASE CHECK BOX.**

TIME: _____

LOCATION: _____

ADDRESS: _____

PHONE: _____

CITY: _____

CHARTER DATE: _____

CLUB NUMBER: _____

PRESIDENT: _____

STREET: _____

CITY: _____

PHONE: _____

H: _____

O: _____

C: _____

F: _____

EMAIL: _____

PRESIDENT ELECT: _____

STREET: _____

CITY: _____

PHONE: _____

H: _____

O: _____

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F: _____

EMAIL: _____

PRESIDENT NOMINEE: _____

STREET: _____

CITY: _____

PHONE: _____

H: _____

O: _____

C: _____

F: _____

EMAIL: _____

SECRETARY: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

TREASURER: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

RI FOUNDATION: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

MEMBERSHIP: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

PUBLIC IMAGE: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

SERVICE PROJECTS: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____

YOUTH SERVICES: _____
STREET: _____
CITY: _____
PHONE: _____
H: _____
O: _____
C: _____
F: _____
EMAIL: _____