



Lions Clubs International District Membership Chairperson

Please submit the following information on the district membership chairperson who has been appointed to serve a three year term through the year _____

DISTRICT MEMBERSHIP CHAIRPERSON

Name: First (please print) Middle Last Suffix

Address _____

City _____

State _____

Zip Code _____

Country _____

District _____

Club Name _____ Club Number _____

Telephone Numbers:

Home () _____ Home Fax: () _____

Business () _____ Business Fax: () _____

E-Mail: _____

Signature

Name (please print) _____

District Governor, District _____

Date

Send completed form

BY August 1st to:

Lions Clubs International

Membership Operations Department

300 22nd Street

Oak Brook, Illinois 60523-8842 U.S.A.