Chicagoland Regional Area H&I Registration and Update Form

Area ______________________________

Meeting Day, time and location:
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____
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Chairperson's Name ______________
Phone # ______________
Email ______________

Vice/Co Chairperson	______________	Secretary	______________	Treasurer	______________
Phone #	______________	Phone #	______________	Phone #	______________
Email	______________	Email	______________	Email	______________

Members Name	Phone	Email