



LEAGUE OF UNITED LATIN AMERICAN CITIZENS

2018 RE-CHARTER APPLICATION

CONTACT INFORMATION FORM

Council Number _____ District _____

Name of Council _____

EIN Number _____

Is this a Young Adult Council? Yes No

(See LULAC Constitution, pg. 22 for a definition of a Young Adults Council)

Complete all the required information for the principal point of contact. All correspondence will be sent to this address.

Name _____

Council Office (President, VP, etc.) _____

Home Phone _____

Work Phone _____

Address _____

City _____ State _____ Zip _____

*Fax _____ Email _____

*This must be a dedicated fax line.