



**LEAGUE OF UNITED LATIN AMERICAN CITIZENS**

**2019 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.