

Us TOO International Chapter Information Form

Please Mail to: Us TOO 5003 Fairview Av Downers Grove IL. 60515 or Fax to: 630-795-1602

Please type or print very clearly

Chapter Name: Us TOO _____ Chapter

Chapter City:

State:

Country:

Chapter Contact Information

(Contact Information that is available to be published for the public)

Contact Name:

Contact Phone:

Contact email:

Materials Shipping Information (no PO BOXES please)

Shipping Name:

Shipping Address:

Shipping Address Line 2

Shipping City:

State:

Zip:

Meeting Information

Meeting Schedule (day/time/frequency):

Meeting Location/address:

Volunteer Leadership Information (must complete all fields)

Chapter Leader:

Address:

Address Line2:

City:

State:

Zip:

Phone:

Fax:

Email:

Alternate Leader:

Address:

Address Line 2:

City:

State:

Zip:

Phone:

Fax:

Email:

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Advocacy Contact:

Address:
Address Line 2:
City:
State:
Zip:
Phone:
Fax:
Email:

Sponsor (if any)

Sponsoring Organization:

Sponsor Contact:
Address:
Address Line 2:
City:
State:
Zip:
Phone:
Fax:
Email:

List any other Chapter affiliations with other National Organizations (i.e., Man to Man) _____

Chapter Demographics

Area Served: _____
Current Number of Members: _____

Will your chapter have its own independent 501c3 status? _____

Please attach a list of 10 names of those who are willing to assist with the management and support of your chapter. (including name/address/phone/email)

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Contact Terri Gibbons Chapter Services Program Manager if you have any questions.

Office – 630-795-1002 or 800-808-7866 or email @ terri@ustoo.org