



MULTIPLE DISTRICT CHAIRPERSON REPORT FORM

Fiscal Year _____ Multiple District _____

The multiple district chairpersons shown are designated by the International Board of Directors. Please do not change the titles. This form may be completed and submitted: 1) by mail or fax at 630-706-9273; 2) electronically through the WMMR association's membership website; 3) by e-mail to: englishlanguage@lionsclubs.org. **If chairperson prefers information to be sent to an address other than his/her home address, please provide address on billing address line. Submit completed information by July 31st.**

The multiple district chairpersons below serve for one year, although re-appointment is permissible. There are two chairpersons that are appointed for three years. They are: Leo club and Lions Quest. For these positions, Youth Camp and Exchange Chairpersons and the GMT/GLT Multiple District Coordinators you will receive separate forms from the appropriate LCI departments/divisions.

CONVENTION

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

DIABETES AWARENESS AND ACTION

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

HEARING PRESERVATION, AWARENESS AND ACTION

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

INFORMATION TECHNOLOGY

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

INTERNATIONAL RELATIONS

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

LIONS ALERT

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

LIONS SERVICES FOR CHILDREN

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

PROTOCOL

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

PUBLIC RELATIONS AND LIONS INFORMATION

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

SIGHT PRESERVATION, AWARENESS AND ACTION

Home Club Name _____ Home Club Number _____ Member Number _____

First Name _____ Middle Initial _____ Last/Surname _____

Home Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Billing Address _____

City _____ State/Province/Country _____ Postal/Zip Code _____

Business Phone _____ Mobile Phone _____

Home Phone _____

Fax _____

E-Mail _____

YOUTH (LIONS OPPORTUNITIES FOR YOUTH)

Home Club Name Home Club Number Member Number

First Name Middle Initial Last/Surname

Home Address

City State/Province/Country Postal/Zip Code

Billing Address

City State/Province/Country Postal/Zip Code

Business Phone Mobile Phone

Home Phone

Fax

E-Mail

Signature of Council Chairperson Date: