



CLUB REACTIVATION REPORT

Please complete the information below and mail to the English Language Department at International Headquarters, or fax to 630-706-9273, or e-mail to englishlanguage@lionsclubs.org

Club Name	Club Number	District
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The following have been completed:

- Club has paid its account balance (attach copy of receipt).
- Club has minimum of ten members.

REACTIVATION AND NEW MEMBER FEES

The following fees are billed directly to the club after it is returned to active status:

- US\$25 per former member who has not been a Lion member during the preceding twelve months
- US\$25 per new member
- Current semi-annual membership dues

OFFICERS OF THE CLUB (List Full Names)

PRESIDENT

Name: _____
First/Given Name
Middle Initial
Last/Family Name

Member Number: _____ Male Female

Home Address: _____

City	State/Province/Country	Postal/Zip Code
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Billing Address: _____

City	State/Province/Country	Postal/Zip Code
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Telephone: (Bus.) _____ (Res.) _____

Fax: _____ E-mail: _____

CLUB REACTIVATION REPORT (FORMER MEMBERS)

Please list all former members who were in the club when it was placed on status quo and who are continuing their membership in the club. Provide full name (not nickname), address and occupation. Please print or type information.

Club Name _____ District _____ Date _____

_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code
_____	MEMBER NUMBER _____	
Name		
_____	_____	_____
Occupation	Address	Postal Code

CLUB REACTIVATION REPORT (NEW AND TRANSFER MEMBERS)

Please list new and transfer club members including full name (not nickname), address, occupation and name of sponsor. If the member is transferring from another club, also provide the name of that club. Please print or type information.

Club Name _____ District _____ Date _____

_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	
_____ Name	_____ Member Number	_____ Address	_____ Postal code
_____ Occupation	_____ Sponsor	_____ Club Name if transfer	