



# Georgia DeMolay State Parents' Club

## Report of Chapter Parents' Club Officers

CHAPTER NAME: \_\_\_\_\_ CHAPTER NUMBER: \_\_\_\_\_

CHAPTER LOCATION: \_\_\_\_\_  
(Lodge) (City)

CLUB MEETS: (Circle One) Weekly Bi-Weekly Monthly Bi-Monthly

LOCATION OF MEETINGS: \_\_\_\_\_

OFFICERS TERMS: Begins \_\_\_\_\_ Ends \_\_\_\_\_  
(Month) (Month)

TOTAL MEMBERSHIP IN CLUB: \_\_\_\_\_  
(Attach a copy of Membership Roster including name, address, phone # and email address of each member)

### CLUB OFFICERS

PRESIDENT: \_\_\_\_\_

VICE PRESIDENT: \_\_\_\_\_

TREASURER: \_\_\_\_\_

SECRETARY: \_\_\_\_\_

CHAPLAIN: \_\_\_\_\_

Date of Installation: \_\_\_\_\_

This report should be completed at the time of installation of a new slate of Chapter Officers. If your Parents' Club Officers have not changed, you only need to complete this form once per year at the beginning of each new Georgia DeMolay year (July). Forward completed form to the State Director of Parents' Clubs, with a copy to your local Advisory Council. Please keep a copy to file with your clubs minutes.

This report is accurate as of \_\_\_\_\_  
(Date)

REPORT SUBMITTED BY: \_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)