

Unit Chairman's List – Unit# _____

District # _____

Complete this form and send to Department Headquarters and the District President

Americanism: Name _____

Member ID _____

Daytime Phone _____

Email _____

AEF: Name _____

Member ID _____

Daytime Phone _____

Email _____

C&Y: Name _____

Member ID _____

Daytime Phone _____

Email _____

Comm. Svs: Name _____

Member ID _____

Daytime Phone _____

Email _____

C&B: Name _____

Member ID _____

Daytime Phone _____

Email _____

Education: Name _____

Member ID _____

Daytime Phone _____

Email _____

Girls State: Name _____
Member ID _____
Daytime Phone _____
Email _____

Juniors: Name _____
Member ID _____
Daytime Phone _____
Email _____

Leadership: Name _____
Member ID _____
Daytime Phone _____
Email _____

Legislative: Name _____
Member ID _____
Daytime Phone _____
Email _____

Membership: Name _____
Member ID _____
Daytime Phone _____
Email _____

National Sec.: Name _____
Member ID _____
Daytime Phone _____
Email _____

PPP: Name _____
Member ID _____
Daytime Phone _____
Email _____

Poppy: Name _____
Member ID _____
Daytime Phone _____
Email _____

P.R.: Name _____
Member ID _____
Daytime Phone _____
Email _____

VA&R: Name _____
Member ID _____
Daytime Phone _____
Email _____

Return Form to Department: Email: membership@alaf1.org or
Mail: 1912A Lee Rd., Orlando, Florida 32810