



WACOPS MEMBERSHIP ROSTER / CONTACT INFORMATION

WACOPS Bylaws state that any organization belonging to the Council should provide WACOPS with an updated member contact list to be used ONLY by the Council for such purposes as approved by the Council Executive Board. Such lists shall be provided to the Council no later than January 1 and updated no later than July 1 of each year. If any changes are made to your roster, you must notify WACOPS in writing/email. You may use this form or create your own but all requested information should be included. Please make additional page copies as needed. Please return this completed form to Julie Morley, Communications Specialist at WACOPS@WACOPS.org.

Please complete ALL requested information below.

ORGANIZATION INFORMATION PRINT

Organization Name: _____

Mailing Address: _____ City: _____ Zip: _____

Office Phone: () _____ Email: _____

DELEGATE CONTACT: PRINT

DELEGATE Name: _____
FIRST LAST MIDDLE INITIAL

Cell Phone: () _____ Work Phone: () _____
AREA CODE AREA CODE

Personal Email: _____ Work Email: _____

PRESIDENT: PRINT

PRESIDENT Name: _____
FIRST LAST MIDDLE INITIAL

Cell Phone: () _____ Work Phone: () _____
AREA CODE AREA CODE

Personal Email: _____ Work Email: _____

VICE-PRESIDENT: PRINT

VICE-PRESIDENT Name: _____
FIRST LAST MIDDLE INITIAL

Cell Phone: () _____ Work Phone: () _____
AREA CODE AREA CODE

Personal Email: _____ Work Email: _____

SECRETARY/TREASURER: PRINT

SEC./TREAS. Name: _____
FIRST LAST MIDDLE INITIAL

Cell Phone: () _____ Work Phone: () _____
AREA CODE AREA CODE

Personal Email: _____ Work Email: _____



WACOPS MEMBERSHIP ROSTER / CONTACT INFORMATION

FIRST/LAST NAME: _____

PERSONAL CELL PHONE: _____

WORK PHONE: _____

PERSONAL EMAIL: _____

WORK EMAIL: _____

FIRST/LAST NAME: _____

PERSONAL CELL PHONE: _____

WORK PHONE: _____

PERSONAL EMAIL: _____

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