



# CHAPTER MEETING

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No

Name: \_\_\_\_\_ School: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you registered to vote?  Yes  No