

# YEARBOOK DATA

## 2020-2021

SEND TO to NJSFWC Headquarters, 55 Labor Center Way, New Brunswick, NJ 08901 by

**MAY 1, 2020**

Please Type or Print Legibly - Circle Telephone Area Code

Club: \_\_\_\_\_ District: \_\_\_\_\_

Number of Women's Club Members for 2020-2021: \_\_\_\_\_\*

Number of EM Members for 2020-2021: \_\_\_\_\_\*

Total number of Members for 2020-2021: \_\_\_\_\_\*

*\*Please answer questions on the reverse side. Thank you.*

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Affiliate Club: \_\_\_\_\_ District: \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes, include a list of your members-plus the name of their primary club.)

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President: \_\_\_\_\_  
(First Name) (Initial) (Last Name)

Address: \_\_\_\_\_

Telephone (201-609-732-856-908-973) \_\_\_\_\_ Basic Zip + 4: \_\_\_\_\_

E-mail: \_\_\_\_\_

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Recording Secretary: \_\_\_\_\_  
(First Name) (Initial) (Last Name)

Address: \_\_\_\_\_

Telephone (201-609-732-856-908-973) \_\_\_\_\_ Basic Zip + 4: \_\_\_\_\_

E-mail: \_\_\_\_\_

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Treasurer: \_\_\_\_\_  
(First Name) (Initial) (Last Name)

Address: \_\_\_\_\_

Telephone (201-609-732-856-908-973) \_\_\_\_\_ Basic Zip + 4: \_\_\_\_\_

E-mail: \_\_\_\_\_

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State Board Trustee: \_\_\_\_\_

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Meeting Place: \_\_\_\_\_

Day: \_\_\_\_\_ Time: \_\_\_\_\_

Telephone (201-609-732-856-908-973) \_\_\_\_\_

