

## 2016 ALADDIN SHRINE DIRECTORY – UNIT INFORMATION FORM

NAME OF UNIT: \_\_\_\_\_ Number of Members: \_\_\_\_\_  
Monthly Meetings Held: \_\_\_\_\_ Location: \_\_\_\_\_

DIRECTOR: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

ASSISTANT DIRECTOR: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

SECRETARY: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

TREASURER: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

MEMBERSHIP CHAIRMAN: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

TABLOID CHAIRMAN: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_

CIRCUS CHAIRMAN: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Lady's Name: \_\_\_\_\_