ALADDIN SHRINE DIRECTORY - CLUB INFORMATION FORM

NAME OF CLUB			
ADDRESS WHERE THE CLUB M	EETS:		
NO. OF MEMBERS	MONTHLY MEETING HELD ON:		
PRESIDENT'S NAME		MEMBERSHIP #	
ADDRESS:			
ADDRESS: STREET		CITY	ZIP
HOME/CELL AREA CODE AND NUMBER	WORK/CELL AREA CODE	WIFE'S NAME	
E-MAIL ADDRESS			
FIRST VICE PRESIDENT:		MEMBERSHIP #	
ADDRESS:		CITY	
STREET		CITY	ZIP
HOME/CELL AREA CODE AND NUMBER	WORK/CELL_ AREA CODE A	WIFE'S NAME	
		MEMBERSHIP #	
ADDRESS:			
ADDRESS: STREET		CITY	ZIP
HOME/CELLAREA CODE AND NUMBER	WORK/CELL	WIFE'S NAMEND NUMBER	
		MEMBERSHIP #	
E-MAIL ADDRESS			
ADDRESS:			
ADDRESS: STREET		CITY	ZIP
HOME/CELL_ AREA CODE AND NUMBER	_WORK/CELL_ AREA CODE A	WIFE'S NAMEAND NUMBER	
TREASURER'S NAME		MEMBERSHIP #	
E-MAIL ADDRESS			
ADDRESS:STREET		CITY	ZIP
HOME /CELL_ AREA CODE AND NUMBER	WORK/CELL_ AREA CODE	WIFE'S NAMEAND NUMBER	
	MEMBERSHIP #		
E-MAIL ADDRESS			
ADDRESS: STREET		CITY	ZIP
HOME/CELL_ AREA CODE AND NUMBER	_WORK/CELL_ AREA CODE	WIFE'S NAMEAND NUMBER	
TABLOID CHAIRMAN		MEMBERSHIP#	
E-MAIL ADDRESS			
ADDRESS:			
ADDRESS: STREET		CITY	ZIP
HOME/CELL AREA CODE AND NUMBER	_WORK/CELL_ AREA CODE	WIFE'S NAMEAND NUMBER	