



Chapter Management & Member Development:

Name of Chapter: _____

Date(s) of Program: _____

Name of Program: _____

Number of Chapter Members Attending: _____

Name of Advisor: _____

Signature of Advisor: _____

Program Description: _____

- Program: _____ Active Member Development
_____ Risk Management
_____ Social Event
_____ Educational/Scholarship Event

Signature of Chapter Representative

Date

Signature of Chapter Advisor

Date