



Application for Incorporation

Local Chapter Name: _____

Local Chapter Address: _____

Street

NY

City

State

Zip Code

County

EIN

(address used to apply for EIN if different from above)

Are you already incorporated?

Yes - Name under which Incorporated: _____

No

Initial Directors of the corporation (please print or type):

1) _____

Name

Address

2) _____

Name

Address

3) _____

Name

Address

Chapter Officers (please print or type name and address):

President: _____

Vice President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Other: Name/Title & address _____

Attachments: Local Chapter Bylaws

Please send completed form with Chapter Bylaws to: Incorporation Chair – see Leadership Directory