

# NAMI North Carolina

## Affiliate Leaders Address and Telephone Contact Update Form

### Affiliate Information

Affiliate Name: \_\_\_\_\_

† Mail to Affiliate should be sent to the President's address

**Or**

† Mail to Affiliate should be sent to the following address

Name: \_\_\_\_\_

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

Phone (Daytime): \_\_\_\_\_ (Eve.) \_\_\_\_\_

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

**President** Name: \_\_\_\_\_

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

Phone (Daytime): \_\_\_\_\_ (Eve.) \_\_\_\_\_

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

**Treasurer** Name: \_\_\_\_\_

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

Phone (Daytime): \_\_\_\_\_ (Eve.) \_\_\_\_\_

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

**Member who is Legislative Liaison (if any)**      Name: \_\_\_\_\_

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

Phone (Daytime): \_\_\_\_\_ (Eve.) \_\_\_\_\_

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

\*please make copies for your future updates.