

Officer Information Sheet/Election Report

JOOI Club Name: _____

JOOI Club No. _____ (New charters leave blank)

Name of Sponsoring Optimist Club: _____

Club No. _____

JOOI Club Adviser:

Name: Mr. Ms. _____

Address: _____

City: _____ State/Prov.: _____ Zip/Postal Code: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

Optimist Serving as Chairman of JOOI Club Committee:

Name: _____

Address: _____

City: _____ State/Prov.: _____ Zip/Postal Code: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

JOOI Club Officers: (Optional for Alpha Clubs)

President: _____ Grade Level: _____

Address: _____

City: _____ State/Prov.: _____ Zip/Postal Code: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

Secretary/Treasurer: _____ Grade Level: _____

Address: _____

City: _____ State/Prov.: _____ Zip/Postal Code: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

Possible Projects Discussed:

1. _____

2. _____