

FOUNTAIN OF THE SUN ASSOCIATION	FOS CLUB & ACTIVITY GROUP CLUB OFFICERS	540 S 80 STREET MESA, AZ 85208 480-380-4000
CLUB/GROUP NAME: _____		
EFFECTIVE DATE: _____ DATE SUBMITTED: _____		

President

Name: _____
 FOS Address: _____
 Home Phone: _____ Cell Phone: _____
 Email Address: _____

Vice-President

Name: _____
 FOS Address: _____
 Home Phone: _____ Cell Phone: _____
 Email Address: _____

Treasurer

Name: _____
 FOS Address: _____
 Home Phone: _____ Cell Phone: _____
 Email Address: _____

Secretary

Name: _____
 FOS Address: _____
 Home Phone: _____ Cell Phone: _____
 Email Address: _____

By signing this, I verify that the above information is accurate at the time of signing.

Signature: _____ (club/group president or leader) Print name: _____
 Date: _____