

	Lod	ge #:	_ State:
address Where Lodge Mail Should be Sent: (Please	e print clearly)		
Address	City	State	Zip
odge Contact:			
Phone:	Email:		
erm Begin Date:			
Member#	-	N	1ember #
President:	_ Secretary:		
Contact Phone:	_ Contact Phone:		
Email:	_ Email:		
		N	1ember #
Vice President:			
Contact Phone:	_ Contact Phone:		
Email:			
Member #	_	٨	1ember #
2 <sup>nd</sup> Vice President:	Sgt-at-Arms:		
Contact Phone:	Contact Phone:		
Email:	_ Email:		
Member #	-	٨	1ember #
State Trustee:	_ Chaplain:		
Contact Phone:	_ Contact Phone:		
Email:	_ Email:		
If an NFOP Database Usage Agreement is already on file with the NFOP and neither the President nor Secretary have changed, list the Designated Users below and we will extend their access to match the Term Expire Date you have listed above.		Lodge Secreta	ry
		ate Report Com	oleted