

**South Central Region  
Embroiderers' Guild of America, Inc.**

**Chapter Officer Report**

**The Chapter President should complete and submit this form to the Region Director by December 31st.  
A copy of this form has also been sent to the Region Representative. Please keep completed copies for  
the files of the President and the Region Representative notebooks.**

**NOTE: Press TAB to move from field to field.  
EVERY FORM FIELD MUST BE FILLED IN EVEN IF IT'S WITH 'N/A'**

Chapter Name Street Address  
City State Zip  
Chapter Website Address

Email: (Please include a contact name of someone who regularly checks and responds to email as this address will be posted on the EGA website)

Does your chapter/guild have a website? Yes  No  Website Address \_\_\_\_\_  
Does your chapter/guild have a Facebook page? Yes  No  Page Name \_\_\_\_\_

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**Please list an email address for each officer if possible:**

**President** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

**Vice President** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

**Region Rep** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

**Newsletter** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

**Membership** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

**Treasurer** EGA Number \_\_\_\_\_  
Email Address Term Length (mo/yr-mo/yr) \_\_\_\_\_

Report Prepared By Title \_\_\_\_\_  
Date \_\_\_\_\_  
E-Mail \_\_\_\_\_