



Student/Local Chapter Update Form

Chapter Name: _____ No. _____

Date Established: _____

School: _____

Address: _____
Street

_____, _____
City State Zip Code

Phone Number: _____

Email Address/Website: _____

Main Contact: _____ Phone: _____

President: _____

Vice President: _____

Treasurer: _____

Secretary: _____

News or Events:

Please return this form to:

*ETA International
ATTN: Lora Roberson, CSS
5 Depot St
Greencastle, IN 46135*

*ETA International
5 Depot St
Greencastle, IN 46135
800-288-3842*