

Trike Riders International *Chapter Charter Application*

The Chapter Leader must read and sign below.

Charter agreement: The Chapter hereby applies for a charter with Trike Riders International and is enclosing the necessary papers and fee for one year.

The undersigned agrees that its Chapter activities will comply with the TRI Operations Manual and guidelines, will further TRI principles and objectives, and that their charter will be valid or may be renewed only if their activities are in compliance with the above.

Signed by Chapter Director / Leader _____

Date: _____

CHARTER FEE \$50.00

Indicate Receipt of form and funds
Forward to appointing leader

- State**
- Region**
- Operations Group**
- Forward to Bus. Group**

- All Chapter Leaders & Staff must be current TRI members. • Chapter must have a minimum of 7 current TRI members
- A VLU must be attached or on file for all TRI Leadership and Special Responsibility Staff • Does Chapter have required minimum staff? Leader / Asst. Leader / Treasurer

Chapter Designation (Area Initials & Number): _____

Chapter Name: _____

Web Address: _____

Charter Date: _____

PLEASE PRINT OR TYPE – REQUIRED POSITIONS – FORM AVAILABLE AS A WORD.RTF

Chapter Director /Leader:	Member #	Home Phone:	Work Phone:
_____	_____	_____	_____
Address:		City:	State:
_____		_____	_____
E-Mail:		VLU SIGNED and on file? Date & where filed	
_____		_____	

Assistant Chapter Director / Leader:	Member #	Home Phone:	Work Phone:
_____	_____	_____	_____
Address:		City:	State:
_____		_____	_____
E-Mail:		VLU SIGNED and on file? Date & where filed	
_____		_____	

Treasurer:	Member #	Home Phone:	Work Phone:
_____	_____	_____	_____
Address:		City:	State:
_____		_____	_____
E-Mail:		VLU SIGNED and on file? Date & where filed	
_____		_____	

CHARTER CHECKLIST

- 1. List Additional 4 members on other side only if a new application. Make sure Leadership and Staff listed above has current VLU on file. Attach new if required
- 2. Make a copy for your Chapter records
- 3. Forward the original to the next position available in your chain of communication
- 4. Next positions shall indicate their receipt, make a copy and forward the original

Page Two of Two Chapter Charter Application / Additional names.

Member Name:	Member #	City:	State:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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