

Club Information



Please type or print clearly exactly as you would like it to appear on your club charter certificate.

Club name: _____ Club number _____ District _____

Contact Information:

Club contact phone number: _____

Club contact email: _____

Club website: _____

Club Meeting Information: Weekly 1st & 3rd 2nd & 4th

Meeting day _____ Meeting time: _____

Meeting place: _____

Facility (if applicable): _____

Address: _____

City: _____ State/Province: _____

Country: _____ Postal code: _____

Please check the box that best describes your club:

- Community
- Company
- Government agency
- Correctional institution
- College or university
- Religious organization

Check here if this is an advanced club

Is your club supported by a sponsoring organization?

- Yes No

If yes, please check all that apply:

- Organization pays dues and new member fees
- Organization pays dues only
- Organization pays new member fees only
- Organization pays club charter fee
- Organization provides meeting location

Is your club:

- open to all interested persons open only to members of a specific organization or group

Sponsoring Organization Information:

This is the organization that may pay dues, charter fees, new member fees, and/or provide a meeting location. Please also provide the name of the **parent company**, if applicable. Example: Company X. Do not enter affiliate name. Example: Company X of California.

Organization name _____ Organization contact _____

Website _____ Phone number _____

Address line 1 _____

Address line 2 _____

City _____ State/Province _____ Country _____ Postal code _____

Industry _____

GROUP EXEMPTION AUTHORIZATION Return with Charter Application Forms (U.S. clubs only) to Toastmasters International

You are authorized to include this Toastmasters club:

_____ in the application for group exemption filed with the Internal Revenue Service.

Signed _____ Date _____

CLUB OFFICER