**Provincial and Local Association Officers/Directors Report
20****to 20**

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| Association Name:       | Association #:       |
| The annual meeting was held on:       | Date of next annual meeting:       |
| Local Dues: $      | Provincial Dues: $      | National Dues: **$20.00** | Total Dues: $      |
| Association email address (required):       |
| **Please list the position, CTF ID #, complete name, address, phone number and email address of all officers and directors, including the Association Manager, in your association.** |
| Position: **President** | CTF ID#:       | Position: **Vice President** | CTF ID#:       |
| Term Begins:       | Term Ends:       | Term Begins:       | Tern Ends:       |
| Name:       | Name:       |
| Address:       | Address:       |
| City:       | Province:        | City:       | Province:        |
| Postal Code:       | Phone #:        | Postal Code:       | Phone #:        |
| Email Address:       | Email Address:       |
| Position: **Assoc. Manager** | CTF ID#:       | Position: **Youth Coordinator** | CTF ID#:       |
| Term Begins:       | Term Ends:       | Term Begins:       | Tern Ends:       |
| Name:       | Name:       |
| Address:       | Address:       |
| City:       | Province:        | City:       | Province:        |
| Postal Code:       | Phone #:        | Postal Code:       | Phone #:        |
| Email Address:       | Email Address:       |
| Position:       | CTF ID#:       | Position:       | CTF ID#:       |
| Term Begins:       | Term Ends:       | Term Begins:       | Tern Ends:       |
| Name:       | Name:       |
| Address:       | Address:       |
| City:       | Province:        | City:       | Province:        |
| Postal Code:       | Phone #:        | Postal Code:       | Phone #:        |
| Email Address:       | Email Address:       |
| Position:       | CTF ID#:       | Position:       | CTF ID#:       |
| Term Begins:       | Term Ends:       | Term Begins:       | Tern Ends:       |
| Name:       | Name:       |
| Address:       | Address:       |
| City:       | Province:        | City:       | Province:        |
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| Email Address:       | Email Address:       |

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| Position:       | CTF ID#:       | Position:       | CTF ID#:       |
| Term Begins:       | Term Ends:       | Term Begins:       | Tern Ends:       |
| Name:       | Name:       |
| Address:       | Address:       |
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