
Young Professionals Request For Organizational Authority

This form should be sent to the Civitan district governor immediately after the first meeting of the new club-in-progress.

For the organization of the _____ Club.

City _____ State/Province _____ Country _____

Sponsored by the _____ Civitan Club
of the _____ District.

Approximate population of the community _____

Is there already a YP Civitan club in the same community? _____

How many pre-charter meetings have been held to date? (A pre-charter meeting is a meeting in which the program, purposes and principles of Civitan have been discussed.) _____

If this Request for Organizational Authority is approved, where and when will the subsequent meetings of this YP Civitan group be held? _____

What is the target date for chartering of this new club? _____

What civic activities and service projects does this club plan to undertake at an early date following charter? (Joint project with sponsoring club encouraged.)

Acting in the belief that a YP Civitan club would be to the best interests of the community described above, we, as club organizers, request from Civitan International the authority to establish a YP Civitan club here in accordance with Civitan International established requirements.

Name: _____ Initiation Fee Collected?

Address: _____ Yes No

City: _____ State/Province: _____ Postal Code: _____

Email: _____ Cell: _____ Home: _____

Name: _____ Initiation Fee Collected?

Address: _____ Yes No

City: _____ State/Province: _____ Postal Code: _____

Email: _____ Cell: _____ Home: _____

Name: _____ Initiation Fee Collected?
 Address: _____ Yes No
 City: _____ State/Province _____ Postal Code: _____
 Email: _____ Cell: _____ Home: _____

Name: _____ Initiation Fee Collected?
 Address: _____ Yes No
 City: _____ State/Province _____ Postal Code: _____
 Email: _____ Cell: _____ Home: _____

Name: _____ Initiation Fee Collected?
 Address: _____ Yes No
 City: _____ State/Province _____ Postal Code: _____
 Email: _____ Cell: _____ Home: _____

Approved: _____
 President of Sponsoring Club(s) _____ Date

Approved: _____
 District Governor _____ Date

Approved: _____
 Civitan International _____ Date

The Accredited/Certified Club Builders for this new Civitan Club will be:

1. _____
 Name/Address _____ Club _____
2. _____
 Name/Address _____ Club _____
3. _____
 Name/Address _____ Club _____
4. _____
 Name/Address _____ Club _____
5. _____
 Name/Address _____ Club _____

Mail this completed form to your governor. The district governor will sign and forward to:

Civitan International
YP Program
P. O. Box 130744
Birmingham, AL 35213-0744

Fax: (205) 592-6307
Email: yp@civitan.org