

**NEW CHAPTER INTENT FORM**

PROPOSED CHAPTER NAME: \_\_\_\_\_ Charger Alumni Chapter

Common tie that binds members of the Chapter: \_\_\_\_\_

PROPOSED CHAPTER LEADER: (Required for each chapter)

Name: \_\_\_\_\_  
(First) (Middle) (Last) (Maiden or Former Name)

Phone: (      ) \_\_\_\_\_

Email: \_\_\_\_\_

Class Year: \_\_\_\_\_

Term Begin Date: \_\_\_\_\_ Term End Date: \_\_\_\_\_

**PROPOSED CHAPTER MEMBERS: ( Minimum of 10 members required, including the Chapter Leader)**

1.	(Name)	(Phone)	(Email)	(Class Year)
2.	(Name)	(Phone)	(Email)	(Class Year)
3.	(Name)	(Phone)	(Email)	(Class Year)
4.	(Name)	(Phone)	(Email)	(Class Year)
5.	(Name)	(Phone)	(Email)	(Class Year)
6.	(Name)	(Phone)	(Email)	(Class Year)
7.	(Name)	(Phone)	(Email)	(Class Year)
8.	(Name)	(Phone)	(Email)	(Class Year)
9.	(Name)	(Phone)	(Email)	(Class Year)
10.	(Name)	(Phone)	(Email)	(Class Year)

Submit completed New Chapter Intent Form to [alumni@uah.edu](mailto:alumni@uah.edu).