

MEMBERSHIP PLAN for Year 2021-2022

POST NUMBER: _____

DATE SUBMITTED: _____

DISTRICT NUMBER: _____

REVISION NUMBER: _____

Post Membership Chairperson Name: _____

Post Membership Chairperson phone number(s): _____ Home
_____ Cell

MEMBERSHIP PLANNED EVENTS FOR RECRUITING

1st HALF

2nd HALF

Location of
Event: _____

Location of
Event: _____

Location of
Event: _____

Location of
Event: _____

Location of
Event: _____

Location of
Event: _____

ANNUAL & UNPAID MEMBERSHIP CONTACTS

1st HALF

2nd HALF

Post Member(s) assigned:
Names: _____

Post Member(s) assigned:
Names: _____

Contact Goal is: Check Planned Method

Number of Phone, email, US Mail,
Contacts: _____ in Person, **(All of the Above)**

Number of Phone, email, US Mail,
Contacts: _____ in Person, **(All of the Above)**

Number of Phone, email, US Mail,
Contacts: _____ in Person, **(All of the Above)**

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Contacts: _____ in Person, **(All of the Above)**

Post Adjusted Membership by National for this Year is: _____

Post Membership Goals are: Total Members: _____ Percent(_____. ____%) New Members: _____

Renewals: _____, Reinstated: _____, New Life Memberships: _____.

Submitted by Post Membership Chairperson:

Membership Chairperson: _____ Date: _____

Approved by Post Commander:

Post Commander: _____ Date: _____

District Commander reviewed and submitted to Department:

District Commander: _____ Date: _____