

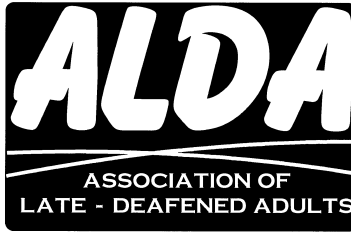
ALDA GROUP CHARTER PETITION

We, the petitioners below, reside in or near (City, State) _____ and are committed to improving the lives of late-deafened adults. Accordingly, we hereby petition ALDA, Inc. to grant us a charter as an affiliated ALDA Group operating under franchise of ALDA, Inc. We pledge that if this petition is granted we will abide by any policies approved by the ALDA, Inc. Board of Directors which are relevant to local ALDA Groups.

We further pledge that our Group will hold meetings on a regular basis, a minimum of two (2) per year, with the understanding that our meetings may not be face-to-face meetings but rather may be electronic meetings. Those meetings may consist of program presentations, social activities, educational outings, the conduct of Group business, and so forth. In addition to holding regular meetings, our Group will maintain an outreach program which, at minimum, shall include ongoing efforts to identify and recruit new members, to work with other organizations and deaf service providers in our area for the common good of people with hearing loss, and to promote the existence, purposes and functions of ALDA, Inc. whenever and wherever possible.

We attest that we are eighteen (18) years of age or older, current members of ALDA, Inc., and that our dues are paid up-to-date. We have provided our names, addresses, phone numbers, and email addresses below, as well as identified who will be the Leader of our Group if this petition is granted. In addition, we have provided a brief summary of our activities during the past year or since our group began meeting (whichever time period is shorter), and we have given two choices for our requested Group name.

We hereby affix our names and other information to this petition on this _____ day of _____, 19 _____.



Petition to Be Recognized as an ALDA Group

The three individuals below affirm that they have given permission for their names to be placed on this petition; that they are over 18 years old; that they are members in good standing of ALDA, Inc, with their dues paid up-to-date; and that the person identified as "Leader" will be the Leader of our requested Group if this petition is granted.

(Please Print All Information)

1. **Name (Leader):** _____
Address: _____
Phone Number: _____ **Email:** _____
2. **Name:** _____
Address: _____
Phone Number: _____ **Email:** _____
3. **Name:** _____
Address: _____
Phone Number: _____ **Email:** _____

REQUESTED GROUP NAME

(1ST Choice): ALDA - _____ (2nd Choice): ALDA _____

BRIEF SUMMARY OF PAST ACTIVITIES
