

# MARYLAND WRITERS' ASSOCIATION

## New Chapter Application

Date of Application: \_\_\_\_\_  
County or Geographic Region of Maryland: \_\_\_\_\_  
Proposed Meeting Location: \_\_\_\_\_

### Proposed Chapter Officers:

President: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Treasurer: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Vice Pres.: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Secretary: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

### MWA members who wish to form the chapter in addition to the officers:

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_