



NEW YORK STATE MOOSE ASSOCIATION

Request for Consideration of Elected Office

To be processed by the Nominating Committee at the State Convention

Complete all applicable fields and select only one office for consideration.

The form may be completed electronically, saved, and printed for signatures.

1. OFFICE REQUESTED

☐ President ☐ Vice President ☐ Chaplain ☐ Treasurer ☐ Secretary

2. APPLICANT INFORMATION

First Name	Middle Name	Last Name	Age
Home Address	City	State	ZIP
Phone	Email		
Occupation	If retired, former occupation		

3. LODGE AND MEMBERSHIP INFORMATION

Lodge Name	Lodge No.	Date Joined
Legion / Council	No.	Date Joined
Lodge Total Membership	Association Dues Paid?	☐ Yes ☐ No
Attained Last Year's Membership Quota?	☐ Yes ☐ No	25 Club? ☐ Yes ☐ No
25 Club Division	Total Members Signed	

4. FRATERNAL QUALIFICATIONS

Past Lodge President?	☐ Yes ☐ No	Term(s) Served
Honorary Past President?	☐ Yes ☐ No	Date Received
Past District President?	☐ Yes ☐ No	Date(s)



NEW YORK STATE MOOSE ASSOCIATION Request for Consideration of Elected Office - Continued

4. FRATERNAL QUALIFICATIONS - CONTINUED

Fellowship? ☐ Yes ☐ No Date Received Pilgrim? ☐ Yes ☐ No Date Received

Lodge Dues Paid? ☐ Yes ☐ No Legion Dues Paid? ☐ Yes ☐ No

5. ASSOCIATION AND FRATERNAL SERVICE

Lodge Offices Held

Moose International / Supreme Lodge Appointments

State Association Committees

Present Association Office or Committee Assignments

Other Outstanding Service to Your Lodge or the Association

6. STATEMENT OF INTEREST AND COMMITMENT

Explain why you are seeking this office, the experience you bring, and how you will continue to perform additional service for your Lodge, the Association, and the fraternity.

7. SUBMISSION AND RECOMMENDATION

Applicant Signature or Typed Name

Date

Recommended By - Nominating Committee Member

Date

RETURN COMPLETED FORM TO THE STATE SECRETARY

Peter Harrigan, NYSMA Secretary

11 Brooktree Circle, Lindenhurst, NY 11757

Cell: (631) 433-3078 | Email: nyassoc@mooseunits.org