



2020 State Organizations Information Form

Date: _____ **State Organization Name:** _____

Official State Organization's address (this is to be used for official notifications):

Address: _____

City: _____ State: _____ Zip code: _____

Tel.: _____ Email address: _____

State Organization Website: _____

Name of State Organization President: _____

Address: _____

City: _____ State: _____ Zip Code: _____ email address: _____

Please list below other elected officers of the State Organization:

Title: _____ Name: _____ Address: _____

City: _____ Zip Code: _____ Tel. _____ Email: _____

Title: _____ Name: _____ Address: _____

City: _____ Zip Code: _____ Tel. _____ Email: _____

Title: _____ Name: _____ Address: _____

City: _____ Zip Code: _____ Tel. _____ Email: _____

Title: _____ Name: _____ Address: _____

City: _____ Zip Code: _____ Tel. _____ Email: _____

Title: _____ Name: _____ Address: _____

City: _____ Zip Code: _____ Tel. _____ Email: _____

Use additional paper if needed

When were the above officers elected? _____

When will be your next elections for officers? _____

When was your bylaws last approved and/or amended? _____

Have you attached a copy of your current Bylaws to this form? _____ (note: even if you think that USA Judo already have a current copy of your Bylaws we are asking that you send us a copy so that we may update our State Organizational files.

Are you familiar with the system that allows one person from your State Organization as assigned by the President to go into our online system and obtain a list of your current members and current clubs? _____
If not, please have your president contact me and I will provide you with this information!

Are you incorporated in your State? If so, please submit a copy of your articles of incorporation.

Thank you for your assistance and cooperation to get these forms and information to our office.

Fee: \$100.00 for the period January 1 through December 31

Please mail to:

**USA Judo
1 Olympic Plaza
Colorado Springs, Colorado 80909
Attn: Corinne Shigemoto**

-----Office Use Only -----

Bylaws on file _____ Bylaws checked for compliance by _____ Date: _____

Copies of Article of Incorporation _____ Check for compliance: _____ Date: _____

State Dues Paid: _____

Other notes: _____