

**Ikebana International**

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LIST OF ELECTED DIRECTORS FORM

*Even if there are no changes in Directors, send this form to the Headquarters every year after the election.

** If you are a North & Central American Chapter please also send this form to narikebana@gmail.com.

Chapter Name: _____ No. _____ Date: _____

Chapter Email Address: _____ Chapter Website Address: _____

Chapter Facebook Link: _____

Term of Directors – From: _____ (month/year) to: _____ (month/year)

	Directors	Membership No.	Last name, First name	Contact
1.	President	No.		Tel:
				Cell:
				E-mail:
2.	1 st VP	No.		Tel
				Cell:
				E-mail:
3.	2 nd VP	No.		Tel
				Cell:
				E-mail:
4.	Recording Secretary	No.		Tel
				Cell:
				E-mail:
5.	Corresponding Secretary	No.		Tel
				Cell:
				E-mail:
6.	Treasurer	No.		Tel
				Cell:
				E-mail:
7.	Nominating Director/Other	No.		Tel
				Cell:
				E-mail:

Name: _____ Signature _____

Membership No: _____ Position: _____ Tel: _____

Address: _____ E-mail: _____

(Headquarters use only)

Date Received:	Master Input:
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