



LOCAL UPDATE WORKSHEET

Facility Name: _____ FAA Identifier: _____ Region: _____

Facility Rep Mail Address (if different from President's address): _____

_____ Facility Phone #: _____

NATCA Office Phone #: _____ FAX # _____

Local Officers Information

<u>President</u>		Street Address:
Name: _____		
Email: _____	City: _____ State: _____ Zip: _____	
Member #: _____ Date Effective: _____	Cell Phone: _____ Fax: _____	
<u>Vice-President</u>		Street Address:
Name: _____		
Email: _____	City: _____ State: _____ Zip: _____	
Member #: _____ Date Effective: _____	Cell Phone: _____ Fax: _____	
<u>Secretary</u>		Street Address:
Name: _____		
Email: _____	City: _____ State: _____ Zip: _____	
Member #: _____ Date Effective: _____	Cell Phone: _____ Fax: _____	
<u>Treasurer</u>		Street Address:
Name: _____		
Email: _____	City: _____ State: _____ Zip: _____	
Member #: _____ Date Effective: _____	Cell Phone: _____ Fax: _____	
<u>Legislative Representative</u> (if applicable)		Street Address:
Name: _____		
Email: _____	City: _____ State: _____ Zip: _____	
Member #: _____ Date Effective: _____	Cell Phone: _____ Fax: _____	

FACILITY REPRESENTATIVE SIGNATURE

SIGN
HERE *x*

DATE

Updates for locals from all regions should be faxed or emailed to Mickela Gillfillan:

FAX: 760-477-6080

EMAIL: mickela@natca.net