

## 2021 ONE WEEK OF CARING & SHARING April 1-7<sup>th</sup>, 2021

**Purpose:** Unit members & leaders organize during this one designated week to contact and check in with EVERY possible unit member, past and present.

One entry per unit (no matter how many rejoins you end up with)

This certified form must be received at ALA Nati	onal Headquarters	no later than April 30 <sup>th</sup> .
CERTIFICATION Please type or pro-	_	
Unit Name:	Unit #	Dept:
Unit representative's name (who is filling out form):		Title:
Email: Phone: _		
To qualify for entry into the drawing for a \$25 Emblem Sales REJOINED member from their unit during this week. That meentered as a rejoin into ALAMIS between April 1 - April 24 <sup>th</sup> us	ember must not hav	re paid dues since 2018 & must be
Name of rejoined member:		Member ID:
Certified by Department Secretary: DATE	E	Departments
Dept. Secretary printed signature:  Check here that the unit included their Tax ID #		Please either scan & email to:  membership@ALAforVeterans.org (Subject line: Week of Caring & Sharing)  Or  Fax: 317-569-4502 (Attn: Membership)
*I certify that the <u>rejoined</u> member last paid in 2018 or prior & ALAMIS between 4/1-4/24/20. I've provided or verified her m that the form is filled out legibly & completely.		Due to the unpredictability of mail, use the above methods of transmittal instead.  *Must be received by NHQ by midnight 4/30/2
Please complete the following information:		
Number of unit members participating in making calls or visit Number of unit members who were called or visited:  Number of members that renewed their membership due to un Number of members that rejoined due to unit contact:	nit contact:	
OPTIONAL: Share a specific story where you felt this week r		