



Form 11  
New Chapter Officer Reporting

This form should be completed and e-mailed to [form11@gademolay.org](mailto:form11@gademolay.org) within ten (10) days following the Installation of Officers.

**Chapter Name:** \_\_\_\_\_  
**Installation Date:** \_\_\_\_\_  
**Term Length:** \_\_\_\_\_

**Master Councilor**

Name: \_\_\_\_\_  
DeMolay ID #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Senior Councilor**

Name: \_\_\_\_\_  
DeMolay ID #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Junior Councilor**

Name: \_\_\_\_\_  
DeMolay ID #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Scribe**

Name: \_\_\_\_\_  
DeMolay ID #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Sweetheart**

Name: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Individual Submitting**

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_