



## ANNUAL REPORTING CHECKLIST

### ***What your Chapter must do:***

- \_\_\_\_\_ Complete WAI Annual Chapter Agreement. (See Section 6, Agreement)
- \_\_\_\_\_ Complete the Annual Chapter Report (See Section 6, Report), to include:
  - \_\_\_\_\_ Current permanent chapter address (If part of the WAI Group Ruling - the address the IRS has)
  - \_\_\_\_\_ Current contact information for faculty advisor, if a student chapter.
  - \_\_\_\_\_ Evidence of chapter's incorporation currency. (See Section 8, Articles of Incorporation)
  - \_\_\_\_\_ Evidence of tax-exempt status currency, if not participating in group ruling. (See Section 8, Tax-Exempt Status)
  - \_\_\_\_\_ Provide a copy of articles of incorporation/bylaws amendments, if any, for the previous year.
  - \_\_\_\_\_ Current list of officers, with addresses, telephone numbers, and email addresses
  - \_\_\_\_\_ Report of the current year's membership drive event. (See Section 3, Chapter Events)
  - \_\_\_\_\_ Report of the current year's educational or mentoring outreach event. (See Section 3, Chapter Events)
  - \_\_\_\_\_ Description of the membership drive goal for the coming year. (See Section 3, Chapter Events)
  - \_\_\_\_\_ Description of educational or mentoring outreach goal for the coming year. (See Section 3, Chapter Events)
- \_\_\_\_\_ Current roster of all chapter members, including WAI member numbers, if known.
- \_\_\_\_\_ Enclose \$125.00 for the annual administrative fee.
- \_\_\_\_\_ If reporting after April 30, 2017, enclose \$25.00 reinstatement fee.

### ***What WAI will do:***

- \_\_\_\_\_ Review documents for completeness and compliance.
- \_\_\_\_\_ Update chapter information in chapter listings.
- \_\_\_\_\_ Confirm chapter's official status for the following WAI Fiscal Year.

***By MARCH 31, 2017, return required documents and payment to:***  
Molly Martin, Outreach Director  
3647 State Route 503 South, West Alexandria, OH 45381  
[Mmartin@wai.org](mailto:Mmartin@wai.org)

***Reinstatement fee after April 30, 2017: \$25.00***



**Annual Chapter Agreement**

This agreement is entered into between Women in Aviation International (“WAI”) and the Chapter (“Chapter”).

Chapter agrees to maintain its tax-exempt status with its state or other governmental authority if not included in WAI’s group ruling.

Chapter agrees to keep its incorporation current with its state, province or other governmental authority.

Chapter agrees to annually provide a current copy of its amendments to its articles of incorporation and/or bylaws to the WAI chapter relations manager.

Chapter agrees to maintain a Federal Employer Identification Number.

Chapter agrees to maintain a minimum of 10 chapter members for U.S. Chapters or 6 chapter members for International and Collegiate Chapters, and to ensure that all members of Chapter are current WAI members. Chapter members are defined as persons who pay chapter dues, vote, and /or are allowed to hold office in Chapter.

Chapter agrees to not engage in flying events or host flying events in the name of WAI or Chapter.

Chapter agrees to use all WAI trademarks in accordance with the WAI Trademark Usage Policy, as modified or amended from time to time.

Chapter agrees to maintain its Chapter web site, if established, in accordance with the WAI Web Site Policy, as modified or amended from time to time. This includes keeping the information on the site current and up-to-date.

Chapter agrees to support the mission, vision, goals and objectives of WAI.

Chapter agrees to sponsor annually: (i) at least one educational or mentoring community outreach event, and (ii) at least one membership recruitment event. Chapter agrees to provide plans and reports about events to the WAI chapter relations manager.

Chapter and its members agree to assign any copyrights or other intellectual property related to Chapter activities to WAI.

WAI reserves the right to terminate Chapter’s official status at any time if Chapter does not adhere to the above terms. If Chapter status terminates, Chapter agrees that it will no longer hold itself out as being affiliated with WAI and that it will discontinue the use of WAI’s name and trademark.

This agreement shall not create a partnership, joint venture or agency relationship between WAI and Chapter, and neither WAI nor Chapter shall have the authority to enter into any agreement that would create a binding obligation on the other party.

By signing this agreement, Chapter and WAI agree to adhere to all of the above terms. A signed copy will be returned to the Chapter president.

**Official Chapter**  
Women in Aviation, \_\_\_\_\_ Chapter

**Women in Aviation International**  
WAI Outreach Director, Molly Martin

President’s Name \_\_\_\_\_

Outreach Director’s Signature \_\_\_\_\_

President’s Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_



**ANNUAL REPORT  
FOR YEAR ENDING MARCH 31, 2017**

CHAPTER NAME: Women in Aviation, \_\_\_\_\_ Chapter

CURRENT PERMANENT CHAPTER STREET ADDRESS (if participating in the WAI Group Tax Exemption the address given to the IRS):  
\_\_\_\_\_

CHAPTER MEETING LOCATION: \_\_\_\_\_

DAY OF MONTH: \_\_\_\_\_ TIME: \_\_\_\_\_ AVERAGE ATTENDANCE: \_\_\_\_\_

CHAPTER CONTACT TO BE LISTED ON WAI WEBSITE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

WEB ADDRESS (or FB if any): \_\_\_\_\_  
Is it current? \_\_\_\_\_

CHAPTER ADVISOR (if a student chapter): \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

FEDERAL EMPLOYER TAX IDENTIFICATION NUMBER: \_\_\_\_\_

DATE OF INCORPORATION: \_\_\_\_\_ CURRENT? \_\_\_\_\_

TYPE OF TAX EXEMPTION: \_\_\_\_\_ WAI Group Ruling \_\_\_\_\_ College or University Exemption

\_\_\_\_\_ Separate 501(c)(3) Organization (Current? \_\_\_\_\_) This is only if you are an independent 501(c)3.

HAVE ARTICLES OF INCORPORATION AND/OR BYLAWS BEEN AMENDED DURING THE PAST YEAR (if so, attach copies)? \_\_\_\_\_

***A LISTING OF ALL CHAPTER MEMBERS (MINIMUM OF 10), INCLUDING WAI MEMBER NUMBERS, IF KNOWN, MUST BE ATTACHED TO THIS REPORT.***



**OFFICERS**

**PRESIDENT:** \_\_\_\_\_ WAI#: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**VICE PRESIDENT:** \_\_\_\_\_ WAI#: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**SECRETARY:** \_\_\_\_\_ WAI#: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**TREASURER:** \_\_\_\_\_ WAI#: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_



**MEMBERSHIP CHAIR** \_\_\_\_\_ **WAI#:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**OUTREACH CHAIR:** \_\_\_\_\_ **WAI#:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### **SUMMARY OF YEAR'S ACTIVITIES**

#### **MEMBERSHIP RECRUITMENT EVENTS:**

#### **EDUCATIONAL OR MENTORING OUTREACH EVENTS:**



**SCHOLARSHIPS AWARDED THIS YEAR –  
NAME OF AWARD, DOLLAR VALUE, CRITERIA, HOW IT IS FUNDED:**

**OTHER ACTIVITIES:**



**GOALS FOR NEXT YEAR**

**MEMBERSHIP RECRUITMENT EVENTS:**

**EDUCATIONAL OR MENTORING OUTREACH EVENTS:**

**SCHOLARSHIPS PLANNED NEXT YEAR – NAME OF AWARD, DOLLAR VALUE, CRITERIA, HOW IT IS FUNDED:**

**OTHER ACTIVITIES:**

**PRESIDENT'S SIGNATURE** \_\_\_\_\_ **Date** \_\_\_\_\_