



# United States Women of Today

## Intent To Extend

Complete this form when a decision has been made to work on extending a new Women of Today Chapter. Use this form only if your state does not have your own Intent to Extend. Mail to USWT Extensions Director and USWT Membership Vice President

Chapter/Individual \_\_\_\_\_

State \_\_\_\_\_

### Information About Prospective Chapter

Community Name: \_\_\_\_\_ Population \_\_\_\_\_

Distance from your community to extension \_\_\_\_\_

Extension Chairman \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

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

Have any contacts been made? (Summarize any phone calls or meetings that have been held)

What plans have been made? (List any meetings that are set up, public relations plans, phoning to be done, etc.)

Do you need a USWT Extensions Manual?  Yes  No  
(This manual gives suggestions on how to proceed with your Extension.)

Do you need a USWT Extension Media Kit?  Yes  No  
(This kit has ample posters, invitations, announcements, Public Service Announcements, and is copy-ready for use in Extensions work)

Proposed date for completion of Extension \_\_\_\_\_

Is your chapter willing to work with the new chapter for a full year after it receives its charter?  Yes  No

\_\_\_\_\_  
Chapter President Signature Date

\_\_\_\_\_  
Extensions Chairman Signature Date