



## CONTACT INFORMATION RELEASE FORM

**In LULAC's ongoing effort to protect our Members, no information will be published on the National Website. This release form recognizes that internal sharing of information for official LULAC business may, from time to time, be required.**

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I hereby grant permission for my contact information, detailed below, to be used for official LULAC business and shared with responsible parties.

This permission shall be terminated when I leave the specified office or retract this permission, whichever occurs first. It is the duty of the council president or designated representative to keep contact information up-to-date for current officers.

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, & Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Council Web Address: \_\_\_\_\_

Council Issue Areas (check all that apply):

- |   |                                     |   |   |  |
|---|-------------------------------------|---|---|--|
| <input type="checkbox"/> Civil Rights   | <input type="checkbox"/> Education  | <input type="checkbox"/> Employment     | <input type="checkbox"/> Health               | <input type="checkbox"/> Public Policy |
| <input type="checkbox"/> Immigration    | <input type="checkbox"/> Technology | <input type="checkbox"/> Women's Issues | <input type="checkbox"/> Economic Empowerment |  |
| <input type="checkbox"/> Climate Change |                                     |   |   |  |

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Submitted by (required):

Printed Name: \_\_\_\_\_ Council Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## TEXT RELEASE FORM

In LULAC's ongoing effort to contact LULAC Members quickly and effectively. The LULAC National Office wishes to contact LULAC Members via Text.

This form is a release waiver authorizing the LULAC National Office to communicate via Text. Text Communication will be used to contact members of any LULAC activities happening in their local area.

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I hereby grant permission for the following members to be communicated Via Text:

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_

Member Name: \_\_\_\_\_ Cellular Number: \_\_\_\_\_