



MEMBERSHIP LISTING RELEASE AGREEMENT

For court use, I request Catholic Order of Foresters (COF) provide the information requested below.

I understand that this information belongs to COF and receives protection under COF's privacy policy. I further understand that improper or unauthorized use of the membership listing, labels, audit report, or any other supplied materials may violate Federal and/or state privacy laws and possibly subject the user(s) to fine and civil liability.

If for any reason, I resign my state or local court officer position, I will immediately return all material and listings belonging to COF.

COURT NAME	COURT NUMBER	DATE
OFFICER NAME	OFFICER SIGNATURE	
OFFICER EMAIL ADDRESS	OFFICER TITLE	

To be used for:
LABELS
Number of copies: <input type="checkbox"/> One <input type="checkbox"/> Two
Order: <input type="checkbox"/> Alpha order
Number of labels: <input type="checkbox"/> One per member <input type="checkbox"/> One per address/household
<input type="checkbox"/> Youth 0-18 <input type="checkbox"/> Youth 0-21 <input type="checkbox"/> Select youth ages: _____
<input type="checkbox"/> Adult <input type="checkbox"/> Adult & Youth combined
Additional options: <input type="checkbox"/> Local Court Officers <input type="checkbox"/> State Court Officers <input type="checkbox"/> High Court Officers <input type="checkbox"/> Agents/State:
LISTINGS
Number of copies: <input type="checkbox"/> One <input type="checkbox"/> Two
Order: <input type="checkbox"/> Alpha order
<input type="checkbox"/> Youth 0-18 <input type="checkbox"/> Youth 0-21 <input type="checkbox"/> Select youth ages: _____
<input type="checkbox"/> Adult <input type="checkbox"/> Adult & Youth combined
All requests must be made via this form. No requests via phone. Please scan and email or send by mail to the attention of the COF Fraternal Department. Email jjames@catholicforester.org.